Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 1 of 66

| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| NORTHERN DISTRICT OF ILLINOIS | |
| Case number (if known) | Chapter you are filing under: |
| | ☐ Chapter 7 |
| | ☐ Chapter 11 |
| | ☐ Chapter 12 |
| | ■ Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

2/09/16 10:09AM

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | tt 1: Identify Yourself | | | |
|-----|--|--|----------------------------|------------------------|
| | | About Debtor 1: | About Debtor 2 (Spouse | Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | First name N. | First name | |
| | license or passport). | Middle name | Middle name | |
| | Bring your picture identification to your meeting with the trustee. | Johnson Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., | Jr., II, III) |
| 2. | All other names you have used in the last 8 years | Forget N. Leavy-Johnson | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-8561 | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 2 of 66

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 1635 N Monitor | If Debtor 2 lives at a different address: |
| | | Chicago, IL 60639 | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Cook | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | 747 East Booughton Rd Box 110 Bolingbrook, IL 60440 Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this | Check one: ☐ Over the last 180 days before filing this petition, I |
| | | petition, I have lived in this district longer than in any other district. | have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

Debtor 1 Forget N. Johnson

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 3 of 66

| Debtor 1 Forget N. Johnson | | | | | Case number (if known) | | |
|----------------------------|---|-------------------------------|---|---|---|--|--|
| | | | | | | | |
| Par | t 2: Tell the Court About | Your Bankruptcy | Case | | | | |
| 7. | The chapter of the Bankruptcy Code you are | | | ch, see <i>Notice Required by</i> 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box. | | |
| | choosing to file under | ☐ Chapter 7 | | | | | |
| | | ☐ Chapter 11 | | | | | |
| | | ☐ Chapter 12 | | | | | |
| | | Chapter 13 | | | | | |
| 8. | How you will pay the fee | | | | k with the clerk's office in your local court for more details | | |
| | | order. If yo | about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, order. If your attorney is submitting your payment on your behalf, your attorney may pay with a pre-printed address. | | | | |
| | | ☐ I need to p The Filing | on, sign and attach the Application for Individuals to Pay | | | | |
| | | but is not re that applies | equired to, waive your fe s to your family size and | ee, and may do so only if yo I you are unable to pay the f | n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line see in installments). If you choose this option, you must fi Official Form 103B) and file it with your petition. | | |
| _ | Have you filed for | | | apie. , , , , , , , , , , , , , , , , , , , | omotan com 1005) and more many year pounds. | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No. | | | | | |
| | iast o years: | Yes. | ~ * | \\/hon | Coop number | | |
| | | Distric Distric | | When When | | | |
| | | Distric | | When | Case number Case number | | |
| | | Distric | | wildii | Case number | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | |
| | | Debto | or | | Relationship to you | | |
| | | Distric | ct | When | | | |
| | | Debto | · | | Relationship to you | | |
| | | Distric | ж | When | Case number, if known | | |
| 11. | Do you rent your | ■ No. Go to | o line 12. | | | | |
| | residence? | ☐ Yes. Has | your landlord obtained a | an eviction judgment agains | t you and do you want to stay in your residence? | | |
| | | | No. Go to line 12. | | | | |
| | | | Yes. Fill out <i>Initial St</i> bankruptcy petition. | atement About an Eviction | Judgment Against You (Form 101A) and file it with this | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 4 of 66

| Deb | tor 1 Forget N. Johnso | n | | Case number (if known) | | |
|--|---|-----------------------|--|---|--|--|
| | | | | | | |
| Par | t 3: Report About Any Bu | sinesses | You Own as a Sole Propri | etor | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | | |
| | | ☐ Yes. | Name and location of bu | usiness | | |
| A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Name of business, if any | , | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, St | ate & ZIP Code | | |
| | it to this petition. | | Check the appropriate b | ox to describe your business: | | |
| | | | ☐ Health Care Bus | iness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | ☐ Single Asset Rea | al Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | ☐ Stockbroker (as | defined in 11 U.S.C. § 101(53A)) | | |
| | | | ☐ Commodity Brok | ter (as defined in 11 U.S.C. § 101(6)) | | |
| | | | ☐ None of the above | ve | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation | you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate eadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of perations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 11 U.S.C. 1116(1)(B). | | | |
| | For a definition of small | ■ No. | I am not filing under Cha | apter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapte Code. | r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | |
| | | ☐ Yes. | I am filing under Chapte | r 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Par | t 4: Report if You Own or | · Have Any | / Hazardous Property or A | ny Property That Needs Immediate Attention | | |
| 14. | Do you own or have any | ■ No. | | | | |
| | property that poses or is alleged to pose a threat | ☐ Yes. | | | | |
| | of imminent and identifiable hazard to public health or safety? | | What is the hazard? | | | |
| | Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | | | |
| | | | | Number, Street, City, State & Zip Code | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 5 of 66

| | 9 | |
|-------------------|---|------------------------|
| Forget N. Johnson | | Case number (if known) |

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Debtor 1

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of: |

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
 ☐ Disability. My physical disability causes

Disability. My physical disability causes me to be unable to participate in a briefing in person, by

phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

2/09/16 10:09AM

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| | I am not required to receive a briefing about credit |
|---|--|
| _ | counseling because of: |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 6 of 66

| Deb | tor 1 Forget N. Johnson | n | | Case numb | er (if known) | | |
|------|--|------------------------|--|--|--|--|--|
| Part | 6: Answer These Questi | ions for R | eporting Purposes | | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | |
| | | | ☐ No. Go to line 16b. | | | | |
| | | | Yes. Go to line 17. | | | | |
| | | 16b. | | business debts? Business debts are debts vestment or through the operation of the bu | | | |
| | | | \square No. Go to line 16c. | | | | |
| | | | ☐ Yes. Go to line 17. | | | | |
| | | 16c. | State the type of debts you | owe that are not consumer debts or busine | ess debts | | |
| 17. | Are you filing under Chapter 7? | ■ No. | I am not filing under Chapt | er 7. Go to line 18. | | | |
| | Do you estimate that after any exempt property is excluded and | ☐ Yes. | I am filing under Chapter 7 expenses are paid that fun | . Do you estimate that after any exempt prods will be available to distribute to unsecure | perty is excluded and administrative ed creditors? | | |
| | administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | □ No | | | | |
| | | | ☐ Yes | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 | 00 | □ 1,000-5,000 □ 5001-10,000 □ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 | | |
| | | ☐ 100-1 ☐ 200-9 | | 10,001 25,000 | I wore than 100,000 | | |
| 19. | How much do you | □ \$0 - \$ | 50,000 | ☐ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | |
| | estimate your assets to be worth? | | 01 - \$100,000 | □ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion | | |
| | | | 001 - \$500,000 001 - \$1 million | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | |
| 20. | How much do you estimate your liabilities | □ \$0 - \$ | 50,000 | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | |
| | to be? | _ | 01 - \$100,000 | □ \$10,000,001 - \$50 million | \$1,000,000,001 - \$10 billion | | |
| | | | 001 - \$500,000 001 - \$1 million | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | |
| Part | :7: Sign Below | | | | | | |
| For | you | I have ex | amined this petition, and I d | leclare under penalty of perjury that the info | rmation provided is true and correct. | | |
| | | | | r 7, I am aware that I may proceed, if eligible relief available under each chapter, and I o | | | |
| | | | | d not pay or agree to pay someone who is r the notice required by 11 U.S.C. § 342(b). | not an attorney to help me fill out this | | |
| | | I request | relief in accordance with the | e chapter of title 11, United States Code, sp | ecified in this petition. | | |
| | | bankrupte 1519, and | cy case can result in fines u | nt, concealing property, or obtaining money p to \$250,000, or imprisonment for up to 20 | | | |
| | | Forget | N. Johnson e of Debtor 1 | Signature of Debt | or 2 | | |
| | | Executed | February 9, 2016 MM / DD / YYYY | Executed onM | M / DD / YYYY | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 7 of 66

| Debtor 1 Forget N. Johnso | <u>n</u> | Case number (if known) | | |
|---|---|------------------------|--|--|
| | | | | |
| For your attorney, if you are represented by one | I, the attorney for the debtor(s) named in this petition, of under Chapter 7, 11, 12, or 13 of title 11, United States for which the person is eligible. I also certify that I have | Code, and have | explained the relief available under each chapter | |
| If you are not represented by an attorney, you do not need to file this page. | 342(b) and, in a case in which § 707(b)(4)(Ď) applies, c in the schedules filed with the petition is incorrect. | ertify that I have | no knowledge after an inquiry that the information | |
| | /s/ Glenda J. Gray Signature of Attorney for Debtor | Date | February 9, 2016 MM / DD / YYYY | |
| | Glenda J. Gray | | | |
| | Law Office of Glenda J. Gray Firm name | | | |
| | 223 West Jackson, Suite 1116 Chicago, IL 60606 | | | |
| | Number, Street, City, State & ZIP Code Contact phone (312) 386-1010 | Email address | ladylawgray@gmail.com | |
| | 06185507 Bar number & State | | | |

Desc Main Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39

Page 8 of 66 Document

| Forget N. Johnson First Name filling) First Name tates Bankruptcy Court for the: mber al Form 106Sum | Middle Name Middle Name NORTHERN DISTRICT | Last Name Last Name OF ILLINOIS | | - 0 | |
|---|---|---|--|--|---|
| filing) First Name tates Bankruptcy Court for the: | | | | - 0 | |
| mber | NORTHERN DISTRICT | OF ILLINOIS | | - 0 | |
| | | | | - 0 | |
| al Form 106Sum | | _ | [| | |
| al Form 106Sum | | | | | if this is an led filing |
| al Form 106Sum | | | | | |
| S S.III 1000 all | | | | | |
| nary of Your Assets | and Liabilities ar | nd Certain Statistic | al Information | 1 | 2/15 |
| inal forms, you must fill out a | | | | | • |
| Cammanizo Tour 7 Coole | | | | | |
| | | | | Value of | what you own |
| nedule A/B: Property (Official F Copy line 55, Total real estate, | Form 106A/B) from Schedule A/B | | | \$ | 250,000.00 |
| Copy line 62, Total personal pro | operty, from Schedule A/B. | | | \$ | 0.00 |
| Copy line 63, Total of all proper | ty on Schedule A/B | | | \$ | 250,000.00 |
| Summarize Your Liabilities | | | | | |
| | | | | | bilities you owe |
| nedule D: Creditors Who Have C | Claims Secured by Property | | | | |
| Copy the total you listed in Colu | ımn A, <i>Amount of claım,</i> at | the bottom of the last page of | f Part 1 of Schedule D | \$ | 226,793.70 |
| | mplete and accurate as possion. Fill out all of your schedulinal forms, you must fill out a Summarize Your Assets Medule A/B: Property (Official Fopy line 55, Total real estate, Copy line 62, Total personal processory line 63, Total of all proper | mplete and accurate as possible. If two married people on. Fill out all of your schedules first; then complete the sinal forms, you must fill out a new Summary and check in Summarize Your Assets Summarize Your Assets Medule A/B: Property (Official Form 106A/B) Copy line 55, Total real estate, from Schedule A/B | mplete and accurate as possible. If two married people are filing together, both ar ion. Fill out all of your schedules first; then complete the information on this form, inal forms, you must fill out a new Summary and check the box at the top of this particle. Summarize Your Assets Medule A/B: Property (Official Form 106A/B) Copy line 55, Total real estate, from Schedule A/B | on. Fill out all of your schedules first; then complete the information on this form. If you are filing amende inal forms, you must fill out a new Summary and check the box at the top of this page. Summarize Your Assets Medule A/B: Property (Official Form 106A/B) Copy line 55, Total real estate, from Schedule A/B | mplete and accurate as possible. If two married people are filing together, both are equally responsible for supplying ion. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedulinal forms, you must fill out a new Summary and check the box at the top of this page. Summarize Your Assets Your as Value of Medule A/B: Property (Official Form 106A/B) Copy line 55, Total real estate, from Schedule A/B |

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 16,992.40 Your total liabilities 262,340.10

Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 4,146.00 Copy your combined monthly income from line 12 of Schedule I.....

Schedule J: Your Expenses (Official Form 106J) 3.158.99 Copy your monthly expenses from line 22c of Schedule J.....

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Entered 02/10/16 10:11:39 Case 16-04025 Filed 02/10/16 Desc Main Doc 1

Page 9 of 66 Document

2/09/16 10:09AM

| Debtor 1 | Forget N. Johnson | Case number (if known) | |
|----------|--------------------------------------|------------------------|--|
| | the court with your other schedules. | | |

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,940.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total | claim |
|--|-------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 18,554.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 18,554.00 |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main

Document Page 10 of 66

| • | | |
|---|---------|---------|
| | 2/00/16 | 10.00AM |

| Debtor 1 Forget N. Johnson Middle Name Last Name | Fill in this infor | mation to ident | ify your case and th | nis filin | g: | | | |
|--|--------------------|-----------------------------|--------------------------|-----------|---|----------------|-----------------|---------------------------|
| Debtor 2 (Spose, filling) First Name | Debtor 1 | | | | | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number | Debtor 2 | First Name | Middle | e Name | Last Name | | | |
| Case number | | First Name | Middle | Name | Last Name | | | |
| Official Form 106A/B Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you thin it its best. Be a compite and accurate as possible. It wo married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question property? Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. | United States Ba | ankruptcy Court f | or the: NORTHER | N DIST | RICT OF ILLINOIS | | | |
| Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset filts in more than one category, list the asset in the category where you thin if its best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question and case number (if known). Answer every question are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question and case number every question and another of the entire property? | Case number | | | | | | | ☐ Check if this is an |
| In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you thin it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question of the possible for supplying correct information. If the property of the property of the property? 1.1 | _ | | | | | | ' | |
| In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you thin it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question of the possible for supplying correct information. If work is the property? 1.1 | | | | | | | | |
| In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you thin it if its best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question more space is needed, attach as sparate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question more space is needed, attach as possible. It was not all the property? 1.1 1.2 1.1 1.2 1.3 1.3 1.4 1.5 1.5 1.5 1.5 1.5 1.5 1.6 1.5 1.5 | Official Fo | orm 106A/ | <u>′B</u> | | | | | |
| it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question provided in the property? Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? Interest address, if available, or other description What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land City State ZIP Code Investment property Investment property Investment property Describe the nature of your ownership interest (all the additional pages, write your name and case number (if known). Answer every question Manufactured or Property? Check all that apply Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secur | Schedul | le A/B: F | Property | | | | | 12/15 |
| Part 11 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. | | | | | | | | |
| 1.1 Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. | | | | | | | | |
| The street address, if available, or other description Street address, if available, or other description | Part 1: Describe | Each Residence, | Building, Land, or Oth | ner Real | Estate You Own or Have an Interest In | | | |
| 1.1 1635 N Monitor Street address, if available, or other description Bolingbrook IL 60440-0000 City State ZIP Code Will County What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Current value of the entire property? \$250,000.00 \$250,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions) | Do you own or I | have any legal or e | equitable interest in ar | ıy reside | nce, building, land, or similar property? | | | |
| 1.1 1635 N Monitor Street address, if available, or other description Bolingbrook IL 60440-0000 City State ZIP Code Will County What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Current value of the entire property? \$250,000.00 \$250,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions) | □ No. Go to Par | rt 2 | | | | | | |
| ## Single-family home Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Single-family home Duplex or multi-unit building Condominium or cooperative Current value of the entire property? Size Do not deduct secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Manufactured or mobile home Land Current value of the entire property? \$250,000.00 \$250,000.00 Timeshare Dither Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property (see instructions) Check if this is community property identification number: | _ | | | | | | | |
| Street address, if available, or other description Street address, if available, or other description Single-family home | - Tes. Where | is the property: | | | | | | |
| Street address, if available, or other description Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Land Land Land Land Land Land Land | | | | | | | | |
| Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land City State ZIP Code Mill County Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$250,000.00 \$250,000.00 \$250,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions) Check if this is community property (see instructions) | 1.1 | | | What | is the property? Check all that apply | | | |
| Bolingbrook IL 60440-0000 City State ZIP Code Investment property In | | | de a seintie a | | Single-family home | | | |
| Bolingbrook IL 60440-0000 City State ZIP Code Investment property Investment property It imeshare Other Other Who has an interest in the property? Check one Debtor 1 only County Will County County Manufactured or mobile home Land Current value of the entire property? \$250,000.00 \$250,000.00 \$250,000.00 \$250,000.00 \$250,000.00 \$250,000.00 \$250,000.00 \$250,000.00 \$250,000.00 \$250,000.00 \$250,000.00 Fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions) Other information you wish to add about this item, such as local property identification number: | Street address | , if available, or other of | description | | · - | | | |
| Bolingbrook IL 60440-0000 City State ZIP Code Investment property \$250,000.00 \$250,000.00 Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Current value of the portion you own? Current value of the portion you own? Current value of the entire property? Check one portion you own? \$250,000.00 \$250,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions) | | | | | Condominium or cooperative | | | , |
| City State ZIP Code Investment property \$250,000.00 \$250,000.00 | | | | | Manufactured or mobile home | | | |
| Unit | Bolingbro | ook IL | 60440-0000 | | Land | | | |
| Will County Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this item, property identification number: Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions) | City | State | e ZIP Code | | Investment property | \$25 | 50,000.00 | \$250,000.00 |
| Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this item, property identification number: Check if this is community property (see instructions) | | | | | | Describe tl | he nature of yo | ur ownership interest |
| Will Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: | | | | _ | | | | ncy by the entireties, or |
| County Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: | | | | WIIO | | | • | |
| At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: | Will | | | | Debtor 2 only | | | |
| At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: | County | | | | Debtor 1 and Debtor 2 only | ☐ Check | if this is comn | nunity property |
| property identification number: | | | | _ | | (see ins | structions) | |
| , | | | | | | i, such as loc | al | |
| | | | | | • | umbrances | S | |
| | 2 Add the del | lar value of the | nortion you own fo | r all af | your entries from Port 1 including an | , antrias for | | |
| 2. Add the dellar value of the parties you own for all of your entries from Part 1. including any entries for | | | | | | | | \$250,000.00 |
| 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here | Part 2: Describe | Your Vehicles | | | | | | |
| pages you have attached for Part 1. Write that number here | Do you own lea | se or have leas | al or equitable inter | est in s | uny vahicles, whother they are register. | ad or not? | nclude any ve | hicles you own that |
| pages you have attached for Part 1. Write that number here | | | | | | | | ilicies you own that |
| pages you have attached for Part 1. Write that number here | 3. Cars, vans, tr | rucks, tractors, | sport utility vehicle | es, mote | orcycles | | | |
| pages you have attached for Part 1. Write that number here | | , | - | | | | | |
| pages you have attached for Part 1. Write that number here | | | | | | | | |
| pages you have attached for Part 1. Write that number here | ☐ Yes | | | | | | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 11 of 66

| D | ebtor 1 | Forget N. Johnson | Case number (if known) | |
|----|------------------------------------|--|--|---|
| 4. | | | ecreational vehicles, other vehicles, and accessories shing vessels, snowmobiles, motorcycle accessories | |
| | ■ No | | | |
| | ☐ Yes | | | |
| | | | | |
| 5 | | | of your entries from Part 2, including any entries for per here=> | \$0.00 |
| Р | art 3: Des | scribe Your Personal and Household Items | | |
| | | n or have any legal or equitable interest in a | any of the following items? | Current value of the |
| | | | | portion you own? Do not deduct secured claims or exemptions. |
| 6. | | old goods and furnishings es: Major appliances, furniture, linens, china, kit | chenware | |
| | | Describe | | |
| 7. | Electron Example | | , and digital equipment; computers, printers, scanners; music colle ers, games | ections; electronic devices |
| | ■ No □ Yes. | Describe | | |
| 8. | | bles of value es: Antiques and figurines; paintings, prints, or o other collections, memorabilia, collectibles | other artwork; books, pictures, or other art objects; stamp, coin, or | baseball card collections |
| | ■ No | | | |
| | ☐ Yes. | Describe | | |
| 9. | | ent for sports and hobbies es: Sports, photographic, exercise, and other ho musical instruments | obby equipment; bicycles, pool tables, golf clubs, skis; canoes and | d kayaks; carpentry tools; |
| | ■ No | | | |
| | ☐ Yes. | Describe | | |
| 10 |). Firearn Examp ■ No | ns <i>bles:</i> Pistols, rifles, shotguns, ammunition, and r | elated equipment | |
| | | Describe | | |
| 11 | . Clothes | s oles: Everyday clothes, furs, leather coats, desig | gner wear, shoes, accessories | |
| | ■ No | Describe | | |
| 40 | | | | |
| 12 | 2. Jewelr Examp | | ement rings, wedding rings, heirloom jewelry, watches, gems, gold | l, silver |
| | ■ No | | | |
| | ☐ Yes. | Describe | | |
| 13 | Examp | rm animals oles: Dogs, cats, birds, horses | | |
| | ■ No □ Yes. | Describe | | |
| 14 | . Anv otl | her personal and household items you did no | ot already list, including any health aids you did not list | |
| 1 | ■ No | personal and neadonola homo you did no | are an energy more more many modern and you and not not | |
| | ☐ Yes. | Give specific information | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 12 of 66

2/09/16 10:09AM

| De | ebtor 1 | Forget N. Johnson | Case number (if kno | own) |
|-----|------------------|---|---|---|
| 15 | | he dollar value of all of your entries from art 3. Write that number here | Part 3, including any entries for pages you have attached | \$0.00 |
| Pa | rt 4: Des | scribe Your Financial Assets | | |
| | | n or have any legal or equitable interest i | in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | ■ No | oles: Money you have in your wallet, in your h | home, in a safe deposit box, and on hand when you file your | petition |
| 17. | Examp | ts of money les: Checking, savings, or other financial ac institutions. If you have multiple accoun | counts; certificates of deposit; shares in credit unions, brokents with the same institution, list each. | age houses, and other similar |
| | ■ No □ Yes | | Institution name: | |
| 18. | | mutual funds, or publicly traded stocks bles: Bond funds, investment accounts with b | prokerage firms, money market accounts | |
| | | Institution or issue | er name: | |
| 19. | and jo | ablicly traded stock and interests in incor | porated and unincorporated businesses, including an in | erest in an LLC, partnership, |
| | ■ No □ Yes. | Give specific information about them Name of entity: | | |
| 20. | Negotia | | gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. rransfer to someone by signing or delivering them. | |
| | ■ No □ Yes. | Give specific information about them Issuer name: | | |
| 21. | | nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), | , 403(b), thrift savings accounts, or other pension or profit-sha | aring plans |
| | | List each account separately. Type of account: | Institution name: | |
| 22. | Your sl Examp | | so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications co | mpanies, or others |
| | ■ No □ Yes. | | Institution name or individual: | |
| 23. | | es (A contract for a periodic payment of mo | ney to you, either for life or for a number of years) | |
| | ■ No □ Yes | Issuer name and description. | | |
| 24. | 26 U.S.0 | s in an education IRA, in an account in a C. §§ 530(b)(1), 529A(b), and 529(b)(1). | qualified ABLE program, or under a qualified state tuitio | n program. |
| | ■ No □ Yes | Institution name and descripti | on. Separately file the records of any interests.11 U.S.C. § 52 | 21(c): |
| 25. | Trusts, | equitable or future interests in property | (other than anything listed in line 1), and rights or power | s exercisable for your benefit |
| | | Give specific information about them | | |

Schedule A/B: Property

Official Form 106A/B

Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 13 of 66 Case 16-04025

| De | btor 1 | Forget N. Johnson | Case number (if known) | |
|-----|------------------|---|---|---|
| | | , copyrights, trademarks, trade secrets, and other intellectual les: Internet domain names, websites, proceeds from royalties and | | |
| | | Give specific information about them | | |
| | | es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative association he | oldings, liquor licenses, professional licens | es |
| | ☐ Yes. (| Give specific information about them | | |
| Mc | oney or p | property owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Tax refu ■ No | unds owed to you | | |
| | ☐ Yes. G | Give specific information about them, including whether you already | y filed the returns and the tax years | |
| | ■ No | support les: Past due or lump sum alimony, spousal support, child support, Give specific information | maintenance, divorce settlement, property | settlement |
| | | mounts someone owes you les: Unpaid wages, disability insurance payments, disability benefit benefits; unpaid loans you made to someone else | s, sick pay, vacation pay, workers' compe | nsation, Social Security |
| | ☐ Yes. (| Give specific information | | |
| | Exampl | s in insurance policies les: Health, disability, or life insurance; health savings account (HS | A); credit, homeowner's, or renter's insurar | nce |
| | ■ No □ Yes. N | Name the insurance company of each policy and list its value. Company name: | Beneficiary: | Surrender or refund value: |
| | If you a | erest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life insurne has died. | rance policy, or are currently entitled to rece | eive property because |
| | ☐ Yes. (| Give specific information | | |
| | Exampl ■ No | against third parties, whether or not you have filed a lawsuit of les: Accidents, employment disputes, insurance claims, or rights to Describe each claim | | |
| | | ontingent and unliquidated claims of every nature, including c | counterclaims of the debtor and rights to | set off claims |
| | ■ No | Describe each claim | ounterolating of the desich and rights to | oct on dams |
| 35. | Any fina | ancial assets you did not already list | | |
| | ■ No | Give specific information | | |
| | ∟ res. (| Give specific information | Г | |
| 36 | | ne dollar value of all of your entries from Part 4, including any ort 4. Write that number here | | \$0.00 |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main

Document Page 14 of 66

2/09/16 10:09AM

| Debt | tor 1 Forget N. Johnson | | Case number (if known) | |
|--------------|--|-----------------------------|---------------------------|-------------------|
| Part | 5: Describe Any Business-Related Property You Own or Have an Interes | st In. List any real estate | e in Part 1. | |
| 37. D | o you own or have any legal or equitable interest in any business-related | property? | | |
| | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | |
| | _ | | | |
| Part | 6: Describe Any Farm- and Commercial Fishing-Related Property You O If you own or have an interest in farmland, list it in Part 1. | own or Have an Interest | In. | |
| 46. C | Oo you own or have any legal or equitable interest in any farm- | or commercial fishi | ng-related property? | |
| | No. Go to Part 7. | | | |
| ļ | ☐ Yes. Go to line 47. | | | |
| Part ' | Describe All Property You Own or Have an Interest in That You I | Did Not List Ahove | | |
| | • • • | | | |
| | Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership | • | | |
| | No | | | |
| | Yes. Give specific information | | | |
| _ | Tes. Give specific information | | _ | |
| 54. | Add the dollar value of all of your entries from Part 7. Write that | at number here | | \$0.00 |
| | | | L | |
| Part 8 | List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$250,000.00 |
| 56. | Part 2: Total vehicles, line 5 | \$0.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$0.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$0.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$0.00 | Copy personal property to | tal \$0.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$250,000.00 |

page 5

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main

2/09/16 10:09AM Page 15 of 66 Document

| Fill in this information to identify your case: | | | | | | |
|---|------------------|-------------------|-------------|--|------------------------------------|--|
| Debtor 1 | Forget N. Johnso | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | Check if this is an amended filing | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | rt 1: Identify the Property You Claim as I | Exempt | | | | |
|---|--|--|--------|---|------------------------------------|--|
| 1. | Which set of exemptions are you claiming | ? Check one only, eve | n if y | our spouse is filing with you. | | |
| | ■ You are claiming state and federal nonbar | nkruptcy exemptions. | 11 U.: | S.C. § 522(b)(3) | | |
| | ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | |
| 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| | 1635 N Monitor Bolingbrook, IL 60440 Will County | \$250,000.00 | | \$15,000.00 | 735 ILCS 5/12-901 | |
| | Gifted: 2010; subject to liens and ncumbrances Line from Schedule A/B: 1.1 | fted: 2010; subject to liens and cumbrances | | 100% of fair market value, up to any applicable statutory limit | | |
| | | | | | | |

| \sim | Are you claiming a homestea | | #4FF 07F0 |
|--------|-----------------------------|------|------------------|
| | | | |
| | | | |

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 - No
 - Yes

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 16 of 66 2/09/16 10:09AM

| Fill in this informati | on to identify you | r case: | | | |
|---|-------------------------|---|-----------------------|--|-----------------------------|
| | Forget N. Johns | on | | | |
| | First Name | Middle Name Last Name | | | |
| Debtor 2 (Spouse if, filing) | irst Name | Middle Name Last Name | | | |
| United States Bankru | iptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | | |
| Case number (if known) | | | | _ | if this is an ded filing |
| Official Form 1 | 06D | | | | |
| | | Who Have Claims Secure | d by Property | y | 12/15 |
| | onal Page, fill it out, | two married people are filing together, both are equ number the entries, and attach it to this form. On the | | | |
| | • | nis form to the court with your other schedules. | You have nothing else | to report on this form | |
| _ | of the information | • | rod navo notimig oloo | to report on time remin | |
| | ecured Claims | Delow. | | | |
| | | ore than one secured claim, list the creditor separately t | Column A | Column B | Column C |
| each claim. If more than | one creditor has a pa | articular claim, list the other creditors in Part 2. As much er according to the creditor's name. | | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 City of Chica | go | Describe the property that secures the claim: | \$1,025.00 | \$250,000.00 | \$0.00 |
| c/o Talan & k 300 West Ad: #840 | ams Ste | 1635 N Monitor Bolingbrook, IL 60440 Will County Gifted: 2010; subject to liens and ncumbrances As of the date you file, the claim is: Check all that apply. | | | |
| Chicago, IL 6 | | Contingent | | | |
| Number, Street, City Who owes the debt? | | ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. | | | |
| ☐ Debtor 1 only | | ☐ An agreement you made (such as mortgage or sec | cured | | |
| Debtor 2 only | | car loan) | | | |
| ☐ Debtor 1 and Debtor | 2 only | ■ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the de | ebtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim community debt | relates to a | Other (including a right to offset) | | | |
| Date debt was incurred | I | Last 4 digits of account number 6081 | | | |
| City of Chica Finance | go Dept of | Describe the property that secures the claim: | \$525.00 | \$250,000.00 | \$0.00 |
| Admin Hearin Collections City Hall Rm N LaSalle Chicago, IL 6 | 107 A - 121 | 1635 N Monitor Bolingbrook, IL 60440 Will County Gifted: 2010; subject to liens and ncumbrances As of the date you file, the claim is: Check all that apply. □ Contingent | | | |
| Number, Street, City | | ☐ Unliquidated | | | |
| Who owes the debt? | Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ☐ Debtor 1 only | | ☐ An agreement you made (such as mortgage or sec | cured | | |
| Debtor 2 only | | car loan) | | | |
| ☐ Debtor 1 and Debtor | 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the de | ebtors and another | ☐ Judgment lien from a lawsuit | | | |

Official Form 106D

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main

Document Page 17 of 66

Debtor 1 Forget N. Johnson Case number (if know) Middle Name Last Name ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt 2007 -6865 Date debt was incurred present Last 4 digits of account number City of Chicago Dept of 2.3 \$1,025.00 \$250,000.00 \$0.00 **Finance** Describe the property that secures the claim: Creditor's Name 1635 N Monitor Bolingbrook, IL 60440 Will County **Admin Hearings** Gifted: 2010; subject to liens and Collections ncumbrances City Hall Rm 107 A - 121 As of the date you file, the claim is: Check all that N LaSalle Chicago, IL 60602 ☐ Contingent Number, Street, City, State & Zip Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only ☐ An agreement you made (such as mortgage or secured Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit At least one of the debtors and another ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number 9372 City of Chicago Dept of 2.4 \$250,000.00 \$950.00 \$0.00 Describe the property that secures the claim: **Finance** Creditor's Name 1635 N Monitor Bolingbrook, IL 60440 Will County **Admin Hearings** Gifted: 2010; subject to liens and Collections ncumbrances City Hall Rm 107 A - 121 As of the date you file, the claim is: Check all that **N** LaSalle Chicago, IL 60602 □ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only ☐ An agreement you made (such as mortgage or secured Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number 831A City of Chicago Dept of 2.5 \$12,405.54 \$250,000.00 \$0.00 Describe the property that secures the claim: Water Creditor's Name 1635 N Monitor Bolingbrook, IL 60440 Will County Gifted: 2010; subject to liens and ncumbrances As of the date you file, the claim is: Check all that 333 South State Chicago, IL 60604 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated □ Disputed

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main

Document

Page 18 of 66

| Debtor 1 For | get N. Johnson | | Case number (if know) | | |
|----------------------------|----------------------------|---|-----------------------|--------------|--------|
| First N | lame Middle N | ame Last Name | | | |
| Who owes the | debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mortgage or se | ocured | | |
| Debtor 2 only | | car loan) | curcu | | |
| Debtor 1 and I | Debtor 2 only | ■ Statutory lien (such as tax lien, mechanic's lien) | | | |
| _ | the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| _ | claim relates to a | Other (including a right to offset) | | | |
| community of | lebt | , | | | |
| Date debt was in | curred | Last 4 digits of account number 0484 | | | |
| 2.6 Cook Co | ounty Treasurer | Describe the property that secures the claim: | \$1,691.87 | \$250,000.00 | \$0.00 |
| Creditor's Na | me | 1635 N Monitor Bolingbrook, IL | <u> </u> | <u> </u> | |
| | | 60440 Will County | | | |
| | | Gifted: 2010; subject to liens and | | | |
| | | ncumbrances As of the date you file, the claim is: Check all that | | | |
| | lark, Rm 112 | apply. | | | |
| | , IL 60602 | ☐ Contingent | | | |
| Number, Stre | et, City, State & Zip Code | Unliquidated | | | |
| Who ower the | dah42 Obereli erre | Disputed | | | |
| _ | debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mortgage or se car loan) | cured | | |
| Debtor 2 only | | our loan, | | | |
| ☐ Debtor 1 and I | Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of | the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| | claim relates to a | Other (including a right to offset) | | | |
| community of | ieot | | | | |
| Date debt was in | curred 2015 | Last 4 digits of account number 0000 | | | |
| 2.7 Gothic I | nvestments | Describe the property that secures the claim: | \$14,597.29 | \$250,000.00 | \$0.00 |
| Creditor's Na | | 1635 N Monitor Bolingbrook, IL | ψ14,037.23 | Ψ230,000.00 | Ψ0.00 |
| | | 60440 Will County | | | |
| 5225 We | est Touhy | | | | |
| Ste 213 | • | As of the date you file, the claim is: Check all that apply. | | | |
| Skokie, | IL 60077 | ☐ Contingent | | | |
| Number, Stre | et, City, State & Zip Code | ☐ Unliquidated | | | |
| | | ☐ Disputed | | | |
| Who owes the | debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mortgage or se car loan) | cured | | |
| Debtor 2 only | | car loan) | | | |
| Debtor 1 and I | Debtor 2 only | ■ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of | the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| Check if this community of | claim relates to a lebt | Other (including a right to offset) | | | |
| | 2011 and | | | | |
| | subsequent | | | | |
| Date debt was in | curred years | Last 4 digits of account number | | | |
| | | | 0404 == 400 | 4050 000 00 | A |
| 2.8 J & Son | s Home Repairs | Describe the property that secures the claim: | \$194,574.00 | \$250,000.00 | \$0.00 |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main

Page 19 of 66 Document

Debtor 1 Forget N. Johnson Case number (if know) Middle Name Last Name Creditor's Name 1635 N Monitor Bolingbrook, IL 60440 Will County Gifted: 2010; subject to liens and ncumbrances As of the date you file, the claim is: Check all that 7115 West North Avenue Oak Park, IL 60302 ☐ Contingent Number, Street, City, State & Zip Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secured Debtor 1 only car loan) Debtor 2 only ☐ Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred 4/15/2011 Last 4 digits of account number 0723 Add the dollar value of your entries in Column A on this page. Write that number here: \$226,793.70 If this is the last page of your form, add the dollar value totals from all pages. \$226,793.70 Write that number here: Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name Address City of Chicago On which line in Part 1 did you enter the creditor? 2.2 c/o Roberts & Weddle, LLC Last 4 digits of account number 111 N Canal - Suite 885 Chicago, IL 60606-7218 Name Address City of Chicago On which line in Part 1 did you enter the creditor? 2.3 c/o Goldman & Grant Last 4 digits of account number 205 West Randoplh St. Ste 1100 Chicago, IL 60606 Name Address On which line in Part 1 did you enter the creditor? City of Chicago 2.4 c/o Talan & Ktsanes Last 4 digits of account number 300 West Adams Ste #840 Chicago, IL 60606 Name Address **Cook County Clerk** On which line in Part 1 did you enter the creditor? 2.7 118 North Clark Last 4 digits of account number Chicago, IL 60602

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main

Document Page 20 of 66

Case number (if know) Debtor 1 Forget N. Johnson Middle Name Last Name Name Address **Cook County Collector** On which line in Part 1 did you enter the creditor? 2.7 118 North Clark Last 4 digits of account number Chicago, IL 60602 Name Address Talan & Ktsanes On which line in Part 1 did you enter the creditor? 223 West Jackson Last 4 digits of account number Chicago, IL 60606 Name Address Talan & Ktsanes On which line in Part 1 did you enter the creditor? 2.1 223 West Jackson Last 4 digits of account number Chicago, IL 60606 Name Address Wexler & Wexler On which line in Part 1 did you enter the creditor? 2.2 500 West Madison Last 4 digits of account number **Suite 2910** Chicago, IL 60661

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 21 of 66

2/09/16 10:09AM

| | n to identify your | | | | | | |
|--|---|--|---|---|--|--|---|
| Debtor 1 Fo | orget N. Johnso | n | | | | | |
| Firs | st Name | Middle Name | Last Nan | ne | | | |
| Debtor 2 (Spouse if, filing) Firs | st Name | Middle Name | Last Nan | ne | | | |
| | | | | | | | |
| United States Bankrupt | tcy Court for the: | NORTHERN DISTI | RICT OF ILLINOIS | | | | |
| Case number | | | | | | | |
| (if known) | | | | | | ☐ Check | if this is an |
| | | | | | | amend | ed filing |
| Official Form 10 | 6F/F | | | | | | |
| Schedule E/F: | | ho Have Uns | ecured Claim | 19 | | | 12/15 |
| Be as complete and accur | | | | | creditors with NONP | RIORITY claims. List | |
| he Continuation Page to to the continuation Page to the Continuation Pa | our PRIORITY Un | | | | | p. 3, | |
| 1. Do any creditors hav | o priority upocaurad | | | | | | |
| 5 a, 5.0 a 10 1101 | e priority unsecured | claims against you? | | | | | |
| □ No. Go to Part 2. | e priority unsecured | claims against you? | | | | | |
| _ | e priority unsecured | claims against you? | | | | | |
| No. Go to Part 2. Yes. List all of your priorit identify what type of clepossible, list the claims | ty unsecured claims. aim it is. If a claim has s in alphabetical orde | . If a creditor has more to s both priority and nonpr | iority amounts, list that c or's name. If you have m | laim here an | d show both priority and | d nonpriority amounts. | As much as |
| No. Go to Part 2. Yes. List all of your priorit identify what type of clapossible, list the claim: If more than one creations. | ty unsecured claims. laim it is. If a claim has s in alphabetical orde editor holds a particula | . If a creditor has more the both priority and nonproper according to the creditor claim, list the other cre | iority amounts, list that c or's name. If you have m | laim here and ore than two | d show both priority an priority unsecured clair | d nonpriority amounts. ms, fill out the Continu | As much as ation Page of Part |
| No. Go to Part 2. Yes. List all of your priorit identify what type of clapossible, list the claim: If more than one creations. | ty unsecured claims. laim it is. If a claim has s in alphabetical orde editor holds a particula | . If a creditor has more the both priority and nonproper according to the creditor claim, list the other cre | riority amounts, list that coor's name. If you have meditors in Part 3. | laim here and ore than two | d show both priority and | d nonpriority amounts. | As much as |
| No. Go to Part 2. Yes. List all of your priorit identify what type of clapossible, list the claim: If more than one creations. | ty unsecured claims, laim it is. If a claim has s in alphabetical orde editor holds a particula each type of claim, se | . If a creditor has more the both priority and nonproper according to the credite ar claim, list the other creet the instructions for this | riority amounts, list that coor's name. If you have meditors in Part 3. | laim here and ore than two booklet.) | d show both priority an priority unsecured clair | d nonpriority amounts. ms, fill out the Continu Priority | As much as ation Page of Part Nonpriority amount |
| No. Go to Part 2. Yes. List all of your prioritidentify what type of clipossible, list the claims 1. If more than one cref (For an explanation of | ty unsecured claims, aim it is. If a claim has in alphabetical orde editor holds a particula each type of claim, se | . If a creditor has more the both priority and nonproper according to the credite ar claim, list the other creet the instructions for this | iority amounts, list that c or's name. If you have m editors in Part 3. is form in the instruction | laim here and ore than two booklet.) | Total claim \$16,141.00 | d nonpriority amounts. ms, fill out the Continu Priority amount | As much as ation Page of Part Nonpriority amount |
| No. Go to Part 2. Yes. 2. List all of your priorit identify what type of clapossible, list the claims 1. If more than one cree (For an explanation of Dpt Treasury) | ty unsecured claims. laim it is. If a claim has s in alphabetical orde editor holds a particula each type of claim, so y Name lest Hig | If a creditor has more the both priority and nonproven according to the credite ar claim, list the other create the instructions for the Last 4 dig | iority amounts, list that c or's name. If you have m editors in Part 3. is form in the instruction | laim here and ore than two booklet.) | Total claim \$16,141.00 8/20/15 Last | d nonpriority amounts. ms, fill out the Continu Priority amount | As much as ation Page of Part Nonpriority amount |
| No. Go to Part 2. Yes. List all of your priorit identify what type of clapossible, list the claims 1. If more than one cree (For an explanation of Priority Creditor's 3700 East W. Hyattsville, N | ty unsecured claims. laim it is. If a claim has s in alphabetical orde editor holds a particula each type of claim, so y Name lest Hig | If a creditor has more the both priority and nonpring according to the creditor claim, list the other creditors the instructions for the Last 4 dig | riority amounts, list that cor's name. If you have meditors in Part 3. is form in the instruction | laim here and ore than two booklet.) 226A Opened Active | Total claim \$16,141.00 8/20/15 Last | d nonpriority amounts. ms, fill out the Continu Priority amount | As much as ation Page of Part Nonpriority amount |
| No. Go to Part 2. Yes. List all of your priorit identify what type of clapossible, list the claims 1. If more than one cree (For an explanation of Priority Creditor's 3700 East W. Hyattsville, N | ty unsecured claims, laim it is. If a claim has in alphabetical ordereditor holds a particular each type of claim, so we have the control of | If a creditor has more the both priority and nonpring according to the creditor claim, list the other creditors the instructions for the Last 4 dig | riority amounts, list that cor's name. If you have meditors in Part 3. is form in the instruction gits of account number as the debt incurred? date you file, the claim | laim here and ore than two booklet.) 226A Opened Active | Total claim \$16,141.00 8/20/15 Last | d nonpriority amounts. ms, fill out the Continu Priority amount | As much as ation Page of Part Nonpriority amount |
| No. Go to Part 2. Yes. List all of your priorit identify what type of clapossible, list the claims 1. If more than one cree (For an explanation of Dpt Treasury Priority Creditor's 3700 East Whyattsville, Mumber Street Ci | ty unsecured claims, laim it is. If a claim has in alphabetical ordereditor holds a particular each type of claim, so we have the control of | If a creditor has more the both priority and nonpring according to the creditor claim, list the other cree the instructions for the Last 4 dig When was As of the | riority amounts, list that cor's name. If you have meditors in Part 3. is form in the instruction gits of account number s the debt incurred? date you file, the claim gent | laim here and ore than two booklet.) 226A Opened Active | Total claim \$16,141.00 8/20/15 Last | d nonpriority amounts. ms, fill out the Continu Priority amount | As much as ation Page of Part Nonpriority amount |
| No. Go to Part 2. Yes. List all of your prioritidentify what type of clipossible, list the claim: I from than one cre (For an explanation of Dpt Treasury Priority Creditor's 3700 East W. Hyattsville, M. Number Street Ci | ty unsecured claims, laim it is. If a claim has in alphabetical ordereditor holds a particular each type of claim, so we have the control of | Last 4 dig When was As of the | riority amounts, list that cor's name. If you have meditors in Part 3. is form in the instruction gits of account number s the debt incurred? date you file, the claim gent idated | laim here and ore than two booklet.) 226A Opened Active | Total claim \$16,141.00 8/20/15 Last | d nonpriority amounts. ms, fill out the Continu Priority amount | As much as ation Page of Part Nonpriority |
| No. Go to Part 2. Yes. 2. List all of your prioritidentify what type of clapossible, list the claim: 1. If more than one cre (For an explanation of Dpt Treasury Priority Creditor's 3700 East W Hyattsville, N Number Street Ci Who incurred the de Debtor 1 only | ty unsecured claims. laim it is. If a claim has s in alphabetical orde editor holds a particular each type of claim, so we have a Name Vest Hig MD 20782 ity State Zlp Code ebt? Check one. | Last 4 dig When was As of the Unliqui Dispute | riority amounts, list that cor's name. If you have meditors in Part 3. is form in the instruction gits of account number s the debt incurred? date you file, the claim gent idated | laim here and ore than two booklet.) 226A Opened Active is: Check all | Total claim \$16,141.00 8/20/15 Last | d nonpriority amounts. ms, fill out the Continu Priority amount | As much as ation Page of Part Nonpriority amount |
| No. Go to Part 2. Yes. 2. List all of your prioritidentify what type of clapossible, list the claim: 1. If more than one cree (For an explanation of Dpt Treasury Priority Creditor's 3700 East W Hyattsville, N Number Street Ci Who incurred the de Debtor 1 only Debtor 2 only Debtor 1 and Debt | ty unsecured claims. laim it is. If a claim has s in alphabetical orde editor holds a particular each type of claim, so we have a Name Vest Hig MD 20782 ity State Zlp Code ebt? Check one. | Last 4 dig When was As of the Continu Unliqui Type of P | riority amounts, list that cor's name. If you have meditors in Part 3. is form in the instruction gits of account number s the debt incurred? date you file, the claim gent idated ed | laim here and ore than two booklet.) 226A Opened Active is: Check all | Total claim \$16,141.00 8/20/15 Last | d nonpriority amounts. ms, fill out the Continu Priority amount | As much as ation Page of Part Nonpriority amount |
| No. Go to Part 2. Yes. 2. List all of your priorit identify what type of clapossible, list the claim: 1. If more than one cree (For an explanation of Dpt Treasury Priority Creditor's 3700 East W. Hyattsville, N. Number Street Ci Who incurred the de Debtor 1 only Debtor 2 only At least one of the | ty unsecured claims. laim it is. If a claim has s in alphabetical orde editor holds a particular each type of claim, so we have a constant of the constant of | Last 4 dig When was As of the Contin Unliqui Type of P | riority amounts, list that cor's name. If you have meditors in Part 3. is form in the instruction gits of account number s the debt incurred? date you file, the claim gent idated ed RIORITY unsecured claim | laim here and ore than two booklet.) 226A Opened Active is: Check all aim: | Total claim \$16,141.00 8/20/15 Last 4/01/14 | d nonpriority amounts. ms, fill out the Continu Priority amount | As much as ation Page of Part Nonpriority amount |
| No. Go to Part 2. Yes. 2. List all of your priorit identify what type of clapossible, list the claim: 1. If more than one cree (For an explanation of Dpt Treasury Priority Creditor's 3700 East W. Hyattsville, N. Number Street Ci Who incurred the de Debtor 1 only Debtor 2 only At least one of the | ty unsecured claims. laim it is. If a claim has s in alphabetical ordereditor holds a particular each type of claim, so we have a name Yest Hig MD 20782 ity State Zlp Code ebt? Check one. | Last 4 dig When was As of the Contin Unliqui Type of P Domes It so both priority and nonpress according to the credite ar claim, list the other create the instructions for this arction. It is the other create the instructions for this arction. It is the other create the instructions for this arction. It is the other create the instructions for this arction. It is the other creates the other creates are the o | riority amounts, list that cor's name. If you have meditors in Part 3. is form in the instruction gits of account number at the debt incurred? date you file, the claim gent idated ed RIORITY unsecured classic support obligations | laim here and ore than two booklet.) 226A Opened Active is: Check all aim: | Total claim \$16,141.00 \$8/20/15 Last 4/01/14 That apply | d nonpriority amounts. ms, fill out the Continu Priority amount | As much as ation Page of Part Nonpriority amount |
| □ No. Go to Part 2. ■ Yes. 2. List all of your prioritidentify what type of clapossible, list the claim: 1. If more than one cre (For an explanation of 2.1 Dpt Treasury Priority Creditor's 3700 East W. Hyattsville, N. Number Street Ci Who incurred the de ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 1 and Debtor 1 check if this cla | ty unsecured claims. laim it is. If a claim has s in alphabetical ordereditor holds a particular each type of claim, so we have a name Yest Hig MD 20782 ity State Zlp Code ebt? Check one. | Last 4 dig When was As of the Contin Unliqui Type of P Domes It so both priority and nonpress according to the credite ar claim, list the other create the instructions for this arction. It is the other create the instructions for this arction. It is the other create the instructions for this arction. It is the other create the instructions for this arction. It is the other creates the other creates are the o | riority amounts, list that cor's name. If you have meditors in Part 3. is form in the instruction gits of account number s the debt incurred? date you file, the claim gent idated ed RIORITY unsecured classic support obligations and certain other debts is for death or personal in | laim here and ore than two booklet.) 226A Opened Active is: Check all aim: | Total claim \$16,141.00 \$8/20/15 Last 4/01/14 That apply | d nonpriority amounts. ms, fill out the Continu Priority amount | As much as ation Page of Part Nonpriority amount |

Best Case Bankruptcy

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main

2/09/16 10:09AM Page 22 of 66 Document Debtor 1 Forget N. Johnson Case number (if know) 2.2 **State Collection Servi** \$480.00 Last 4 digits of account number 3063 \$480.00 \$0.00 Priority Creditor's Name Opened 7/16/14 2509 S Stoughton Rd When was the debt incurred? Madison, WI 53716 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ■ Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No ☐ Other. Specify ☐ Yes **Collection Attorney State Of Wisconsin-O** 2.3 **State Collection Servi** Last 4 digits of account number 3458 \$1,933.00 \$1,933.00 \$0.00 Priority Creditor's Name Opened 6/09/15 Last 2509 S Stoughton Rd When was the debt incurred? Active 6/01/13 Madison, WI 53716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ■ Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No ☐ Other. Specify ☐ Yes **Collection Attorney Presence Hith-Smemc**

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Entered 02/10/16 10:11:39 Case 16-04025 Doc 1 Filed 02/10/16 Desc Main 2/09/16 10:09AM Page 23 of 66 Document Debtor 1 Forget N. Johnson Case number (if know) 4.1 1stprogress/1stequity/ Last 4 digits of account number 5423 \$61.00 Nonpriority Creditor's Name Opened 10/05/12 Last Active Po Box 84010 When was the debt incurred? 9/01/14 Columbus, GA 31908 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.2 **Acceptance Now** \$5,964.00 Last 4 digits of account number 0590 Nonpriority Creditor's Name Opened 9/10/13 Last Active 5501 Headquarters Dr When was the debt incurred? 12/23/13 Plano, TX 75024 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated ☐ Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Rental Agreement ☐ Yes 4.3 **Alliance Sol** Last 4 digits of account number 5806 \$208.00 Nonpriority Creditor's Name 534 S Pineapple Av When was the debt incurred? Opened 11/04/14 Sarasota, FL 34236 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated

 Sarasota, FL 34236

 Number Street City State Zlp Code
 As of the date you file, the claim is: Check all that apply

 Who incurred the debt? Check one.
 □ Contingent

 □ Debtor 1 only
 □ Unliquidated

 □ Debtor 2 only
 □ Disputed

 □ At least one of the debtors and another
 □ Student loans

 □ Check if this claim is for a community debt Is the claim subject to offset?
 □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 □ No
 □ Debts to pension or profit-sharing plans, and other similar debts

 □ Other. Specify
 Collection 01 Elite Truck Renta

Entered 02/10/16 10:11:39 Case 16-04025 Doc 1 Filed 02/10/16 Desc Main 2/09/16 10:09AM Page 24 of 66 Document Debtor 1 Forget N. Johnson Case number (if know) 4.4 **Bk Of Amer** Last 4 digits of account number 10 \$0.00 Nonpriority Creditor's Name Opened 1/02/01 Last Active Po Box 982238 When was the debt incurred? 4/03/02 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Check Credit Or Line Of Credit ☐ Yes 4.5 Cap One \$0.00 Last 4 digits of account number 1664 Nonpriority Creditor's Name Opened 3/01/11 Last Active Po Box 19360 When was the debt incurred? 10/01/11 Portland, OR 97280 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated ☐ Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.6 Cap One Last 4 digits of account number 8510 \$0.00 Nonpriority Creditor's Name Opened 10/01/98 Last Active Po Box 85015 When was the debt incurred? 11/01/06 Richmond, VA 23285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed

■ No

☐ Yes

Type of NONPRIORITY unsecured claim:

Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

Other. Specify

report as priority claims

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Entered 02/10/16 10:11:39 Case 16-04025 Doc 1 Filed 02/10/16 Desc Main 2/09/16 10:09AM Page 25 of 66 Document Debtor 1 Forget N. Johnson Case number (if know) **Capital One** Last 4 digits of account number 7709 \$0.00 Nonpriority Creditor's Name Opened 11/25/06 Last Active Po Box 30253 When was the debt incurred? 10/29/08 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes Capital One 4700 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/25/06 Last Active Po Box 30253 When was the debt incurred? 9/09/07 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated ☐ Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card

4.9 Capital One Bank Usa N Last 4 digits of account number 8617 Nonpriority Creditor's Name Opened 10/30/98 Last Active 15000 Capital One Dr When was the debt incurred? 7/04/08 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only

Type of NONPRIORITY unsecured claim:

Obligations arising out of a separation agreement or divorce that you did not

☐ Student loans

■ No

☐ Yes

4.7

4.8

\$0.00

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

| 1 Forget N. Johnson | | Case number (if know) | |
|---|---|--|------|
| | | | |
| Capital One Bank Usa N Nonpriority Creditor's Name | Last 4 digits of account number | 9866 | \$0. |
| 15000 Capital One Dr Richmond, VA 23238 | When was the debt incurred? | Opened 7/18/97 Last Active 8/16/07 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | l claim: | |
| ☐ At least one of the debtors and another | ☐ Student loans | . Claim. | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | 1 | |
| Cbna | Last 4 digits of account number | 0258 | \$0. |
| Nonpriority Creditor's Name | | Opened 5/01/74 Last Active | |
| Po Box 6189 Sioux Falls, SD 57117 | When was the debt incurred? | 8/26/05 | |
| Number Street City State ZIp Code | As of the date you file, the claim is | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| ■ Debtor 1 only □ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 2 only | Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | d claim: | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □Yes | ■ Other. Specify Charge Acc | count | |

Opened 4/17/08 Last Active Po Box 901003 When was the debt incurred? 8/13/08 Columbus, OH 43224 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: $\hfill \square$ At least one of the debtors and another

☐ Student loans $\hfill \Box$ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Is the claim subject to offset? ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Automobile ☐ Yes

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 27 of 66

| Debtor | 1 Forget N. Johnson | | Case number (if know) | |
|--------|---|---|--|----------|
| 4.13 | Citi Nonpriority Creditor's Name | Last 4 digits of account number | 7796 | \$0.00 |
| | Po Box 6241 Sioux Falls, SD 57117 | When was the debt incurred? | Opened 3/31/97 Last Active 8/08/07 | _ |
| | Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only | As of the date you file, the claim i ☐ Contingent | s: Check all that apply | |
| | □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing | ration agreement or divorce that you did not | |
| | ☐ Yes | Other Specify Credit Care | I | _ |
| 4.14 | Cortrust Bk Nonpriority Creditor's Name | Last 4 digits of account number | 1259 | \$0.00 |
| | Po Box 7030 Mitchell, SD 57301 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim i | Opened 8/28/07 | _ |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Care | | _ |
| 4.15 | Debt Recovery | Last 4 digits of account number | 1865 | \$645.40 |
| | Nonpriority Creditor's Name 900 Merchants Concourse Ste 106 Westbury, NY 11500 | When was the debt incurred? | | _ |
| | Westbury, NY 11590 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only | As of the date you file, the claim i ☐ Contingent ☐ Unliquidated | s: Check all that apply | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans | I claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharin ☐ Other. Specify | g plans, and other similar debts | _ |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 28 of 66

| Debtor | 1 Forget N. Johnson | Case number (if know) | | |
|--------|---|--|---|------------|
| 4.16 | Enhanced Recovery Co L Nonpriority Creditor's Name | Last 4 digits of account number | 0672 | \$1,513.00 |
| | 8014 Bayberry Rd Jacksonville, FL 32256 | When was the debt incurred? | Opened 11/01/15 Last Active 9/01/13 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection | Attorney At T | |
| 4.17 | First Choice | Last 4 digits of account number | 2801 | \$0.00 |
| | Nonpriority Creditor's Name | | Opened 11/06/06 Last Active | |
| | 4422 Route 27 Buil Suite 2 Kingston, NJ 08528 | When was the debt incurred? | 11/25/07 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.18 | First Choice Nonpriority Creditor's Name | Last 4 digits of account number | 1382 | \$0.00 |
| | 4422 Route 27 Buil Suite 2 Kingston, NJ 08528 | When was the debt incurred? | Opened 11/06/06 Last Active 10/30/08 | |
| | Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | _ | , | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | ☐ At least one of the debtors and another | Student loans | a Oldini. | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | adion agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit Card | t | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 29 of 66

| Debtor | 1 Forget N. Johnson | Case number (if know) | | | |
|--------|--|--|--|--------|--|
| 4.19 | First Choice Nonpriority Creditor's Name | Last 4 digits of account number | 1050 | \$0.00 | |
| | 4422 Route 27 Buil Suite 2 Kingston, NJ 08528 | When was the debt incurred? | Opened 11/06/06 Last Active 10/30/08 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | As of the date you file, the claim in Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify Credit Card | <u>1</u> | | |
| 4.20 | First Choice Bank/Cws Nonpriority Creditor's Name | Last 4 digits of account number | 2679 | \$0.00 | |
| | 840 Route 33 Mercerville, NJ 08619 | When was the debt incurred? | Opened 11/06/06 Last Active 3/11/09 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify | d claim: ration agreement or divorce that you did not g plans, and other similar debts | | |
| 4.21 | First Choice Bank/Cws | Last 4 digits of account number | 1845 | \$0.00 | |
| | Nonpriority Creditor's Name 840 Route 33 Mercerville, NJ 08619 | When was the debt incurred? | Opened 11/06/06 Last Active 3/11/09 | | |
| | Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No | report as priority claims Debts to pension or profit-sharin | d claim: ration agreement or divorce that you did not g plans, and other similar debts | | |
| | Yes | Other. Specify Credit Card | 1 | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 30 of 66

| Debto | Forget N. Johnson | | Case number (if know) | |
|-------|---|--|---|----------|
| .22 | First Premier Bank Nonpriority Creditor's Name | Last 4 digits of account number | 7383 | \$0.00 |
| | P.O. Box 5147 Sioux Falls, SD 57117-5147 | When was the debt incurred? | Opened 7/01/07 Last Active 10/01/07 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify | | |
| .23 | Fst Premier | Last 4 digits of account number | 6271 | \$432.00 |
| | Nonpriority Creditor's Name | | Opened 0/39/12 Lest Active | |
| | 3820 N Louise Ave Sioux Falls, SD 57107 | When was the debt incurred? | Opened 9/28/12 Last Active 5/01/13 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | d | |
| .24 | Fst Premier | Last 4 digits of account number | 0280 | \$0.00 |
| | Nonpriority Creditor's Name | | Opened 1/02/06 Last Active | |
| | 3820 N Louise Ave Sioux Falls, SD 57104 | When was the debt incurred? | 5/01/06 | |
| | Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other, Specify Credit Care | d | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 31 of 66

| or 1 Forget N. | Johnson | Case number (if know) | | | | |
|---|---|---|--|--------|--|--|
| Fstprogress Nonpriority Credit | or's Name | Last 4 digits of account number | 3268 | \$0.00 | | |
| P.O. Box 84 Columbus. 0 | 010 | When was the debt incurred? | Opened 10/05/12 | | | |
| Number Street Ci | | As of the date you file, the claim i | | | | |
| | e debt? Check one. | ☐ Contingent | | | | |
| Debtor 1 only | | ☐ Unliquidated | | | | |
| Debtor 2 only | | ☐ Disputed | | | | |
| Debtor 1 and | Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | | |
| ☐ At least one o | f the debtors and another | ☐ Student loans | | | | |
| ☐ Check if this Is the claim subj | claim is for a community debt ject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | |
| ■ No | | Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| Yes | | Other. Specify Credit Card | <u> </u> | | | |
| Guaranty Sa | | Last 4 digits of account number | 0001 | \$0.00 | | |
| Nonpriority Credit 7901 W Brow Milwaukee, V | vn Deer Rd | When was the debt incurred? | Opened 5/07/15 Last Active 10/05/15 | | | |
| Number Street Ci | | As of the date you file, the claim i | s: Check all that apply | | | |
| Who incurred the | e debt? Check one. | ☐ Contingent | | | | |
| Debtor 1 only | | ☐ Unliquidated | | | | |
| Debtor 2 only | | ☐ Disputed | | | | |
| Debtor 1 and | Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | | |
| At least one o | f the debtors and another | ☐ Student loans | | | | |
| ☐ Check if this Is the claim subj | claim is for a community debt ject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | |
| No | | Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| ☐ Yes | | Other. Specify Secured | | | | |
| Imagine/Atla | | Last 4 digits of account number | 2353 | \$0.0 | | |
| Po Box 1055 Atlanta, GA | 55 | When was the debt incurred? | Opened 11/16/06 Last Active 4/15/08 | | | |
| Number Street Ci | | As of the date you file, the claim i | s: Check all that apply | | | |
| Who incurred the | e debt? Check one. | ☐ Contingent | | | | |
| Debtor 1 only | | ☐ Unliquidated | | | | |
| Debtor 2 only | | ☐ Disputed | | | | |
| Debtor 1 and | Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | | |
| ☐ At least one o | f the debtors and another | ☐ Student loans | | | | |
| ☐ Check if this Is the claim subj | claim is for a community debt ject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | |
| ■ No | | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| ☐ Yes | | ■ Other. Specify Credit Card | 1 | | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 32 of 66

| Mage & Price | Last 4 digits of account number | 0001 | \$1,000.0 |
|--|--|---|-----------|
| Nonpriority Creditor's Name 707 Lake Cook Road Suite 314 Deerfield, IL 60015 | When was the debt incurred? | Opened 11/21/13 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | ■ Other. Specify Collection | Foster Park Currency | |
| Mcsi Inc | Last 4 digits of account number | 4419 | \$250.00 |
| Nonpriority Creditor's Name | | | • |
| Po Box 327 Palos Heights, IL 60463 | When was the debt incurred? | Opened 4/18/11 | |
| lumber Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| ☐ At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Collection | 01 Village Of Bellwo | |
| Mcsi Inc | Last 4 digits of account number | 3811 | \$150.00 |
| Nonpriority Creditor's Name | | | • |
| Po Box 327 Palos Heights, IL 60463 | When was the debt incurred? | Opened 2/22/11 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| ■ Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| ☐ At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Collection | 01 City Of Harvey | |

Entered 02/10/16 10:11:39 Case 16-04025 Doc 1 Filed 02/10/16 Desc Main 2/09/16 10:09AM Page 33 of 66 Document Debtor 1 Forget N. Johnson Case number (if know) 4.31 Metabank-Ultravx Visa Last 4 digits of account number 2088 \$0.00 Nonpriority Creditor's Name Opened 5/17/07 Last Active 2500 S Minnesota Ave When was the debt incurred? 3/13/08 Sioux Falls, SD 57105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes **Ncc Business Svcs Inc** 4.32 \$6,187.00 Last 4 digits of account number 9388 Nonpriority Creditor's Name Opened 10/21/13 Last Active 9428 Baymeadows Rd Ste 2 When was the debt incurred? 8/01/13 Jacksonville, FL 32256 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated ☐ Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Meadows River Run/ ☐ Yes **Peoples Engy** 4.33 Last 4 digits of account number 2428 \$0.00 Nonpriority Creditor's Name Opened 7/06/06 Last Active 200 East Randolph When was the debt incurred? 9/26/06 Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only

Debtor 2 only Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt Is the claim subject to offset?

■ No ☐ Yes ■ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Utility Company

Case

| 16-04025 | Doc 1 | Filed 02/10/16 | Entered 02/10/16 10:11:39 | Desc Main | |
|----------|-------|----------------|---------------------------|-----------|-----------------|
| | | Document | Page 34 of 66 | | 2/09/16 10:09AM |

| Debtor | 1 Forget N. Johnson | | Case number (if know) | |
|--------|--|--|--|----------|
| 4.34 | Portfolio Recovery Ass Nonpriority Creditor's Name | Last 4 digits of account number | 5665 | \$477.00 |
| | 120 Corporate Blvd Ste 1 Norfolk, VA 23502 | When was the debt incurred? | Opened 12/22/14 Last Active 4/01/13 | |
| | Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only | As of the date you file, the claim i Contingent Unliquidated | s: Check all that apply | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans | claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Nevada N./ | Company Account Hsbc Bank | |
| 4.35 | Purpadv/Fbd Nonpriority Creditor's Name | Last 4 digits of account number | 2283 | \$0.00 |
| | P O Box 105591 Atlanta, GA 30348 | When was the debt incurred? | Opened 8/07/06 Last Active 8/22/06 | |
| | Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify | I claim: ration agreement or divorce that you did not g plans, and other similar debts | |
| 4.36 | Santander Consumer Usa Nonpriority Creditor's Name | Last 4 digits of account number | 1000 | \$0.00 |
| | Po Box 961245 Ft Worth, TX 76161 | When was the debt incurred? | Opened 5/09/05 Last Active 3/19/08 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No | As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharing | I claim: ration agreement or divorce that you did not | |
| | Yes | Other. Specify Automobile | 9 | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 35 of 66

| ebtor 1 _ F | Forget N. | Johnson | | Case n | umber (if know) | |
|--|--|---|--|--|--|--|
| 37 Un | nique Nati | onal Collec | Last 4 digits of account number | 0426 | | \$105.00 |
| 119 | priority Cred 9 E Maple ffersonvil | | When was the debt incurred? | Open 6/13/ | ed 12/21/11 Last Active | |
| | | City State Zlp Code | As of the date you file, the claim i | s: Check | all that apply | |
| Who | o incurred t | he debt? Check one. | ☐ Contingent | | | |
| = 1 | Debtor 1 only | y | ☐ Unliquidated | | | |
| | Debtor 2 only | / | ☐ Disputed | | | |
| | Debtor 1 and | Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | |
| | At least one | of the debtors and another | ☐ Student loans | | | |
| | | s claim is for a community debt oject to offset? | Obligations arising out of a separeport as priority claims | aration agr | eement or divorce that you did not | |
| | No | | Debts to pension or profit-sharing | ıg plans, a | nd other similar debts | |
| | | | | | | |
| | Yes | s to Be Notified About a Debt | | Attorne | ey Oak Park Public Libr | |
| art 3: L Use this pa trying to co | List Others age only if you | ou for a debt you owe to someone | Fhat You Already Listed t your bankruptcy, for a debt that you be also also also also also also also also | u already | listed in Parts 1 or 2. For example, if a content then list the collection agency here. Sim here. If you do not have additional person | ilarly, if you have |
| art 3: L Use this pa trying to co | List Others age only if you collect from you one credito in Parts 1 or | ou have others to be notified about you for a debt you owe to someone in for any of the debts that you lister 2, do not fill out or submit this pa | That You Already Listed It your bankruptcy, for a debt that you else, list the original creditor in Part d in Parts 1 or 2, list the additional ege. which entry in Part 1 or Part 2 did you e of (Check one): | u already rts 1 or 2 creditors list the or Part 1: Cre | listed in Parts 1 or 2. For example, if a country then list the collection agency here. Simplere. If you do not have additional personginal creditor? | ilarly, if you have |
| art 3: L Use this pa trying to co more than any debts i ame and Ac | List Others age only if you collect from you one credito in Parts 1 or | ou have others to be notified about you for a debt you owe to someone or for any of the debts that you lister 2, do not fill out or submit this pa | That You Already Listed It your bankruptcy, for a debt that you else, list the original creditor in Part d in Parts 1 or 2, list the additional ege. which entry in Part 1 or Part 2 did you e of (Check one): | u already rts 1 or 2 creditors list the or Part 1: Cre | listed in Parts 1 or 2. For example, if a cuthen list the collection agency here. Sim here. If you do not have additional personginal creditor? | ilarly, if you have |
| art 3: L Use this pa trying to co more than any debts i ame and Ac NONE- | List Others age only if you ollect from you one credito in Parts 1 or ddress | ou have others to be notified about you for a debt you owe to someone or for any of the debts that you lister 2, do not fill out or submit this pa | That You Already Listed t your bankruptcy, for a debt that you else, list the original creditor in Part din Parts 1 or 2, list the additional or ge. which entry in Part 1 or Part 2 did you e of (Check one): For the 4 digits of account number | u already rts 1 or 2 creditors list the or Part 1: Cre | listed in Parts 1 or 2. For example, if a country then list the collection agency here. Simplere. If you do not have additional personginal creditor? | ilarly, if you have |
| art 3: L Use this pa trying to co more than any debts in ame and Ac NONE- | List Others age only if ye ollect from y one credito in Parts 1 or ddress Add the An | ou have others to be notified about you for a debt you owe to someone or for any of the debts that you lister 2, do not fill out or submit this part on the control of the | That You Already Listed t your bankruptcy, for a debt that you else, list the original creditor in Pad in Parts 1 or 2, list the additional of ge. which entry in Part 1 or Part 2 did you e of (Check one): Et 4 digits of account number cured Claim | u already rts 1 or 2 creditors list the or Part 1: Cree | listed in Parts 1 or 2. For example, if a country then list the collection agency here. Simplere. If you do not have additional personginal creditor? | ilarly, if you have ns to be notified for |
| art 3: L Use this pa trying to co more than any debts is ame and Ac NONE- art 4: A | List Others age only if ye ollect from y one credito in Parts 1 or ddress Add the An | ou have others to be notified about you for a debt you owe to someone or for any of the debts that you lister 2, do not fill out or submit this part on the control of the | That You Already Listed t your bankruptcy, for a debt that you else, list the original creditor in Pad in Parts 1 or 2, list the additional of ge. which entry in Part 1 or Part 2 did you e of (Check one): Et 4 digits of account number cured Claim | u already rts 1 or 2 creditors list the or Part 1: Cree | listed in Parts 1 or 2. For example, if a counter then list the collection agency here. Simplere. If you do not have additional personglinal creditor? ditors with Priority Unsecured Claims ditors with Nonpriority Unsecured Claims | ilarly, if you have ns to be notified for |
| art 3: L Use this pa trying to co more than any debts ame and Ac NONE- art 4: A Total the a of unsecur | List Others age only if ye ollect from y one credito in Parts 1 ol ddress Add the An amounts of c red claim. | ou have others to be notified about you for a debt you owe to someone or for any of the debts that you lister 2, do not fill out or submit this part on the control of the | That You Already Listed t your bankruptcy, for a debt that you else, list the original creditor in Pad in Parts 1 or 2, list the additional of ge. which entry in Part 1 or Part 2 did you e of (Check one): Et 4 digits of account number cured Claim | u already rts 1 or 2 creditors list the or Part 1: Cree | listed in Parts 1 or 2. For example, if a content the collection agency here. Simplere. If you do not have additional personal creditor? ditors with Priority Unsecured Claims ditors with Nonpriority Unsecured Claims urposes only. 28 U.S.C. §159. Add the amount of the content of the conten | ilarly, if you have ns to be notified for |
| art 3: L Use this pa trying to co more than any debts is ame and Ac NONE- art 4: A | List Others age only if ye ollect from ye one credito in Parts 1 old ddress Add the An amounts of cred claim. | ou have others to be notified about you for a debt you owe to someone it for any of the debts that you lister 2, do not fill out or submit this part of the control of the | That You Already Listed t your bankruptcy, for a debt that you else, list the original creditor in Pard in Parts 1 or 2, list the additional or ge. which entry in Part 1 or Part 2 did you er of (Check one): For the 4 digits of account number cured Claim This information is for statistical regions. | u already rts 1 or 2, creditors list the or Part 1: Cre Part 2: Cre | listed in Parts 1 or 2. For example, if a content the collection agency here. Simplere. If you do not have additional personal creditor? ditors with Priority Unsecured Claims ditors with Nonpriority Unsecured Claims urposes only. 28 U.S.C. §159. Add the am | ilarly, if you have ns to be notified for |
| use this patrying to comore than any debts ame and Aconomicate art 4: | List Others age only if ye ollect from ye one credito in Parts 1 old ddress Add the An amounts of cred claim. | ou have others to be notified about you for a debt you owe to someone or for any of the debts that you lister 2, do not fill out or submit this part of the control of the | That You Already Listed It your bankruptcy, for a debt that you else, list the original creditor in Pard in Parts 1 or 2, list the additional or ge. which entry in Part 1 or Part 2 did you ele of (Check one): For the 4 digits of account number cured Claim This information is for statistical regular to the province of the government by while you were intoxicated | u already rts 1 or 2 creditors list the or Part 1: Cre Part 2: Cre | listed in Parts 1 or 2. For example, if a country then list the collection agency here. Sim here. If you do not have additional person ginal creditor? ditors with Priority Unsecured Claims ditors with Nonpriority Unsecured Claims urposes only. 28 U.S.C. §159. Add the am Total claim \$ 0.00 | ilarly, if you have ns to be notified for |

| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
|-----------------------------|-----|--|-----|-------------|-----------|
| Total claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 18,554.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$ | 18,554.00 |
| | | | | Total Claim | |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you | | | |
| nomii art 2 | og. | did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 16,992.40 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$ | 16,992.40 |

Desc Main Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39

Document Page 36 of 66

| Fill in this information to identify your case: | | | | | | | | |
|---|-------------------|-------------------------------|-----------|--|--|--|--|--|
| Debtor 1 | Forget N. Johnson | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT OF ILLINOIS | | | | | | |
| Case number | | | | | | | | |
| (if known) | | | | | | | | |
| | | | | | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

2/09/16 10:09AM

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Numbe | whom you have the r, Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|-------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | City | | State | ZIF Code | |
| 2.3 | Name - | | | | _ |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | | | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | _ |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | | | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | _ |
| | MULLIDE | Oliber | | | |
| | City | | State | ZIP Code | _ |
| | | | | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main

| | | Document | Page 37 of 66 | 2/09/16 10:09AM |
|---------------------|--------------------------|-------------------|---------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Forget N. Johnso | n | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| Official Fo | orm 106H | | | |

| Cabaduda | U. Valle | Codebtors |
|----------|----------|-----------|
| SCHENIHE | H. AUIIL | COMPANA |
| Concauc | II. IVUI | COUCDIO |

12/15

| Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married |
|--|
| people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page |
| fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write |
| your name and case number (if known). Answer every question. |

| ople a | are filing together, both are equally responsible for s | debts you may have. Be as complete and accurate as possible. If two married upplying correct information. If more space is needed, copy the Additional Page, tach the Additional Page to this page. On the top of any Additional Pages, write ion. |
|--------------|--|---|
| 1. D | Oo you have any codebtors? (If you are filing a joint ca | se, do not list either spouse as a codebtor. |
| | No | |
| ■ Y | /es | |
| | Vithin the last 8 years, have you lived in a communit cona, California, Idaho, Louisiana, Nevada, New Mexico, | y property state or territory? (Community property states and territories include Puerto Rico, Texas, Washington, and Wisconsin.) |
| | No. Go to line 3. | |
| ΠY | res. Did your spouse, former spouse, or legal equivalent | live with you at the time? |
| in li For | ine 2 again as a codebtor only if that person is a gua | our spouse as a codebtor if your spouse is filing with you. List the person shown trantor or cosigner. Make sure you have listed the creditor on Schedule D (Official hedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to |
| | Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.1 | Keisha Parham 1635 N Monitor Chicago, IL 60639 | ■ Schedule D, line □ Schedule E/F, line □ Schedule G City of Chicago Dept of Finance |
| 3.2 | Keisha Parham 1635 N Monitor Chicago, IL 60639 | ■ Schedule D, line2.4 □ Schedule E/F, line □ Schedule G City of Chicago Dept of Finance |
| 3.3 | Keisha Parham 1635 N Monitor Chicago, IL 60639 | ■ Schedule D, line2.5 □ Schedule E/F, line □ Schedule G City of Chicago Dept of Water |
| | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 38 of 66

| Debtor ' | Forget N. Johnson | Case number (if known) |
|----------|--|---|
| | Additional Page to List More Codebtors | |
| | Column 1: Your codebtor | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.4 | Keisha Parham 1635 N Monitor Chicago, IL 60639 | ■ Schedule D, line2.3 Schedule E/F, line Schedule G City of Chicago Dept of Finance |
| 3.5 | Keisha Parham 1635 N Monitor Chicago, IL 60639 | ■ Schedule D, line □ Schedule E/F, line □ Schedule G City of Chicago |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 39 of 66

2/09/16 10:09AM

Fill in this information to identify your case: Debtor 1 Forget N. Johnson Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Check if this is: Case number (If known) ☐ An amended filing □ A supplement showing postpetition chapter 13 income as of the following date: Official Form 106I MM / DD/ YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Employment Part 1: Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. ☐ Employed ■ Employed If you have more than one job, **Employment status** attach a separate page with □ Not employed □ Not employed information about additional employers. Occupation Self-employed hair stylist Include part-time, seasonal, or **Employer's name** self-employed work. **Employer's address** Occupation may include student 1635 N Monitor or homemaker, if it applies. Chicago, IL 60639 How long employed there? 5 years Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. 2. 1,040.00 N/A deductions). If not paid monthly, calculate what the monthly wage would be.

3. +\$

+\$

0.00

1.040.00

N/A

N/A

3.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

| Debt | or 1 | Forget N. Johnson | _ | | Case | number (<i>if kn</i> | own) | | | |
|------|--|---|-----------------------------------|----------------------------------|----------------------|-----------------------|--------------------------------------|--------------------------|---------------------------------|----------|
| | | | | | For | Debtor 1 | | | Debtor 2 or | |
| | Сор | y line 4 here | 4. | | \$ | 1,040 | 0.00 | \$ | N/A | |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. 5b. 5c. 5d. 5e. 5f. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations | 5a 5b 5c 5d 5e 5f. |). ;. l.) . | \$ \$ \$ \$ | 0 0 0 | 0.00 0.00 0.00 0.00 0.00 | \$_ \$_ \$_ \$_ | N/A N/A N/A N/A N/A | - |
| | 5g. | Union dues | 5g | | \$_ | | 0.00 | | N/A | |
| 0 | 5h. | Other deductions. Specify: | _ | 1.+ | · — | | 0.00 | + 5_ | N/A | - |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | | 0.00 | \$_ | N/A | |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 1,040 | 0.00 | \$_ | N/A | - |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | |
| | | monthly net income. | 8a | | \$ | | 0.00 | \$ | N/A | - |
| | 8b. 8c. | Interest and dividends Family support payments that you, a non-filing spouse, or a dependent | . 8b |). | \$ | 0 | 0.00 | \$_ | N/A | |
| | 8d. 8e. 8f. | regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps | 8d 8d 8e | l.). | \$ \$ \$ | 0 | 0.00 0.00 0.00 | \$_ \$_ \$_ | N/A N/A N/A | |
| | 8g. | Pension or retirement income | 8g | J. | \$ | | 0.00 | \$ | N/A | |
| | 8h. | Other monthly income. Specify: Contribution from family: | 8h | 1.+ | · · — | 1,350 | | | N/A | - |
| | | Co-Owner Co-Owner | _ | | \$ | 1,400 | 0.00 | \$_ | N/A | - |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | | \$ | 3,106 | 00. | \$_ | N/A | A |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$_ | 4 | 4,146.00 | + \$_ | | N/A = \$ | 4,146.00 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, you refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not cify: | r dep | | | , , | | • | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The relet that amount on the Summary of Schedules and Statistical Summary of Certains | | | | | | | 12. \$Combin | |
| 13. | Do y ■ | you expect an increase or decrease within the year after you file this form No. Yes. Explain: | 1? | | | | | | monthl | y income |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 41 of 66 2/09/16 10:09AM

| Fill | in this informa | ition to identify y | our case: | | | | | | |
|-----------|-------------------------------|--|---------------|--|-----------------------------|--------------------------------|---------------------------|--------------------------------------|--|
| Deb | tor 1 | Forget N. Jo | hnson | | | Cł | neck | if this is: | |
| Dob | tor 2 | | | | | | ٠. | n amended filing | |
| | ouse, if filing) | | | | | | | | ring postpetition chapter the following date: |
| Unit | ed States Bankr | uptcy Court for the | : NORTI | HERN DISTRICT OF ILLIN | OIS | | M | M / DD / YYYY | |
| | e number nown) | | | | | | | | |
| | | rm 106J | | | | | | | |
| | | J: Your | | | | | | | 12/1 |
| info | ormation. If m | | eded, atta | If two married people a ach another sheet to this n. | | | | | |
| Par 1. | t 1: Descr | ibe Your House | ehold | | | | | | |
| | ■ No. Go to | | in a cons | rate household? | | | | | |
| | □ res. Doe | | п а ѕера | ate nousenoid? | | | | | |
| | | _ | st file Offic | ial Form 106J-2, <i>Expense</i> | s for Separate House | ehold of D | Debto | r 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | | |
| | Do not list D and Debtor 2 | | ■ Yes. | Fill out this information for each dependent | Dependent's relation | | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | | □ No |
| | dependents | names. | | | Daughter | | | 15 years | Yes |
| | | | | | Son | | | 19 years | □ No ■ Yes |
| | | | | | | | | | □ No |
| | | | | | Son | | | 25 years | Yes |
| | | | | | | | | | □ No |
| 2 | Do your ove | oncoc includo | | | Friend | | | 40 years | ■ Yes |
| 3. | expenses of | enses include f people other t d your depende | han _ | No Yes | | | | | |
| exp | imate your ex | ate Your Ongo openses as of y a date after the | our bankr | ly Expenses uptcy filing date unless y sy is filed. If this is a supp | ou are using this followers | orm as a e <i>J</i> , checl | sup k the | plement in a Cha box at the top o | pter 13 case to report f the form and fill in the |
| the | | h assistance ar | | government assistance cluded it on Schedule I: | | | | Your expe | enses |
| | | | | | | | | | |
| 4. | | or home owners and any rent for th | | nses for your residence. I or lot. | nclude first mortgag | e 4. | \$ | | 1,393.99 |
| | If not includ | led in line 4: | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 275.00 |
| | • | rty, homeowner' | | | | 4b. | | | 100.00 |
| | | maintenance, ro owner's associa | | upkeep expenses | | 4c. 4d. | | | 0.00 |
| 5. | | | | our residence, such as ho | me equity loans | | \$ | | 0.00 0.00 |

Desc Main 2/09/16 10:09AM Page 42 of 66 Document Debtor 1 Forget N. Johnson Case number (if known) Electricity, heat, natural gas 6a. \$ 350.00 6b. \$ Water, sewer, garbage collection 75.00 Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 50.00 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 556.00 8. Childcare and children's education costs 8. \$ 35.00 9. \$ Clothing, laundry, and dry cleaning 150.00 10. Personal care products and services 10. \$ 34.00 11. Medical and dental expenses 11. \$ 20.00 12. Transportation. Include gas, maintenance, bus or train fare. 120.00 12. \$ Do not include car payments. 13. \$ 0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 14. 0.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. \$ 0.00 15b. \$ 0.00 15c. \$ 0.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. \$ 0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. \$ 0.00 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as 0.00 18. \$ deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. 0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20c. \$ 20c. Property, homeowner's, or renter's insurance 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00

| | 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
|-----|--|------|-----|----------|
| 21. | Other: Specify: | 21. | +\$ | 0.00 |
| 22. | Calculate your monthly expenses | | | |
| | 22a. Add lines 4 through 21. | | \$ | 3,158.99 |
| | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | 22c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3,158.99 |
| 2 | Calculate your monthly net income | | | |

6.

7.

Utilities:

Other. Specify:

6a.

6b.

6c.

6d.

15. Insurance.

Specify:

15a. Life insurance

15b. Health insurance

15c. Vehicle insurance

17c. Other. Specify:

17d. Other. Specify:

20b. Real estate taxes

| 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 4,146.00 |
|------|--|---------|----------|
| 23b. | Copy your monthly expenses from line 22c above. | 23b\$ | 3,158.99 |
| | | | |

| 23c. | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income.</i> 23 | 3c. | \$ 987.01 |
|------|--|-----|-----------|
| | • | | |

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

| No. | |
|--------|---------------|
| ☐ Yes. | Explain here: |
| · · | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 43 of 66

| Debtor 1 | Forget N. Johnso | n | | |
|--|--------------------------|---|-----------------------------------|-----------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| (Spouse II, IIIIIIg) | First Name | wilddie Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| Official For | m 106Dec | | | amended filing |
| | | ın Individual | Debtor's Schedu | |
| Declarat | tion About a | | Debtor's Schedu | ıles |
| Declarated two married potentials the obtaining mone | eople are filing togethe | r, both are equally responding the sankruptcy scheduler nonnection with a ban | nsible for supplying correct info | ıles |

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

No

Yes. Name of person

that they are true and correct.

X /s/ Forget N. Johnson

Forget N. Johnson Signature of Debtor 1

Date February 9, 2016

Signature of Debtor 2

Date

Attach Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119)

| Fill | in this infor | mation to identify you | ır case: | | | |
|---------------|-------------------------------------|---|---|---|---|---|
| | otor 1 | Forget N. Johns | | | | |
| | | First Name | Middle Name | Last Name | | |
| 1 | otor 2 use if, filing) | First Name | Middle Name | Last Name | | |
| Unit | ted States Ba | ankruptcy Court for the | NORTHERN DISTRICT | OF ILLINOIS | | |
| Cas (if kn | se number _ | | | | | Check if this is an imended filing |
| Sta Be a | atement | and accurate as poss | | are filing together, both ar | Sankruptcy e equally responsible for su ny additional pages, write yo | |
| | ber (if know | n). Answer every que | | | | |
| 1. | What is you | ır current marital stat | us? | | | |
| | ☐ Married | | | | | |
| | ■ Not ma | ırried | | | | |
| 2. | During the | last 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. Li | et all of the places you | lived in the last 3 years. Do n | not include where you live no | MA. | |
| | | | | | | |
| | Debtor 1 P | rior Address: | Dates Debtor 1 lived there | Debtor 2 Prior A | ddress: | Dates Debtor 2 lived there |
| | | | | | inity property state or territor Rico, Texas, Washington and \ | |
| | ■ No | | | | | |
| | ☐ Yes. M | ake sure you fill out So | chedule H: Your Codebtors (C | Official Form 106H). | | |
| Par | t 2 Expla | in the Sources of You | ur Income | | | |
| | Fill in the tot If you are fili No | al amount of income yong a joint case and you | mployment or from operating the received from all jobs and a have income that you receive | all businesses, including pai | | endar years? |
| | LI 165. FI | Il in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | | | | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 45 of 66

| De | btor 1 | Fo | rget N. Jo | hnson | | | | Ca | ase number (if known) | | |
|----|------------------------------|---|---|---|--|---|--|--|---|--|---|
| 5. | Includ | you receive any other income during this year or the two previous calendar years? ude income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, employment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. | | | | | | | | | |
| | List e | ach s | source and | the gross inc | ome from e | each source sepa | arately. Do | not include incom | e that you listed in li | ne 4. | |
| | | No | | | | | | | | | |
| | | Yes. | Fill in the d | etails. | | | | | | | |
| | | | | | Debtor 1 | | | | Debtor 2 | | |
| | | | | | Sources Describe | of income below | | s income e deductions and sions) | Sources of inc Describe below | | Gross income (before deductions and exclusions) |
| Pa | rt 3: | List | Certain Pa | ayments You | ı Made Bef | fore You Filed fo | or Bankrup | otcy | | | |
| 6. | | No. Yes. | Neither D individual During the No. Yes * Subject Debtor 1 of During the No. Yes | ebtor 1 nor leprimarily for a 90 days beff Go to line. List below paid that continclude to adjustmentor Debtor 2 of 90 days beff Go to line. List below include pay an attorney | Debtor 2 has a personal, ore you file 7. each credit reditor. Do a payments at on 4/01/1 por both has ore you file 7. each credit yments for a payment for a | family, or houseld for bankruptcy, for to whom you protect include payment of an attorney for an attorney of and every 3 years are primarily conditioned for bankruptcy, for to whom you produce the condition of | did you pa did you pa did you pa did a total leents for do r this bankr lears after th sumer del did you pa deaid a total t obligation | ots. Consumer dese." y any creditor a to of \$6,225* or more mestic support objects at for cases filed obts. y any creditor a to of \$600 or more as, such as child so | otal of \$6,225* or more in one or more parallel of such as considered on or after the date of the otal of \$600 or more and the total amount upport and alimony. | yments and the hild support a suppor | t creditor. Do not include payments to |
| | Crec | ditor' | s Name an | d Address | | Dates of payn | nent | Total amount paid | Amount you still owe | Was this p | payment for |
| 7. | Inside corpo include support | ers in oration ding o ort an | clude your ns of which one for a bu nd alimony. | relatives; any you are an o | general pa officer, direct perate as a | artners; relatives ctor, person in co | of any gene ntrol, or ow | eral partners; part ner of 20% or mo | | ou are a gene curities; and a | |
| | Insid | der's | Name and | Address | | Dates of payn | nent | Total amount | Amount you still owe | Reason fo | r this payment |
| 8. | insid Includ | er? de pa No | yments on | • | teed or cos | ccy, did you mak | ,,, | paid ments or transfer | | ccount of a | debt that benefited ar |
| | | | Name and | | | Dates of payn | nent | Total amount | Amount you | Reason fo | r this payment |
| | | | | | | | | paid | still owe | | ditor's name |
| | | | | | | | | | | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 46 of 66

| De | btor 1 | Forget N. Johnson | | Case number | (if known) | |
|-----|-----------------------|---|-----------------------------|--------------------------------|--------------------------|------------------------|
| | | | | | | |
| Pa | rt 4: | Identify Legal Actions, Repossession | ns, and Foreclosures | | | |
| 9. | List al | n 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes. | | | | |
| | | No Yes. Fill in the details. | | | | |
| | | e title e number | Nature of the case | Court or agency | Status of the | he case |
| 10. | | n 1 year before you filed for bankrupt k all that apply and fill in the details belo | | erty repossessed, foreclosed | , garnished, attache | d, seized, or levied? |
| | _ | No Yes. Fill in the information below. | | | | |
| | Cred | litor Name and Address | Describe the Property | | Date | Value of the property |
| | | | Explain what happened | d | | p p 3 |
| 11. | accou | n 90 days before you filed for bankru unts or refuse to make a payment bed No Yes. Fill in the details. | | luding a bank or financial ins | stitution, set off any | amounts from your |
| | | litor Name and Address | Describe the action the | creditor took | Date action was | Amount |
| | | | | | taken | |
| 12. | court | n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a | | erty in the possession of an a | assignee for the ben | efit of creditors, a |
| | | Yes | | | | |
| Pa | rt 5: | List Certain Gifts and Contributions | | | | |
| 13. | | n 2 years before you filed for bankrup No Yes. Fill in the details for each gift. | otcy, did you give any gift | s with a total value of more t | han \$600 per persor | 1? |
| | | s with a total value of more than \$600 person | Describe the gifts | | Dates you gave the gifts | Value |
| | | on to Whom You Gave the Gift and ress: | | | | |
| 14. | | n 2 years before you filed for bankrup No Yes. Fill in the details for each gift or co | | s or contributions with a tota | al value of more than | າ \$600 to any charity |
| | Gifts more Char | s or contributions to charities that to e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code) | | ı contributed | Dates you contributed | Value |
| | | • | | | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 47 of 66

| Deb | otor 1 | Forget N. Johnson | | C | ase number (| if known) | |
|-----|--------------|--|--------------------------------|--|-----------------|--|------------------------|
| | | | | | | | |
| Por | 4.6. | Liet Cortain Lacase | | | | | |
| Par | ι 6: | List Certain Losses | | | | | |
| 15. | | n 1 year before you filed for bankru ter, or gambling? | uptcy or | since you filed for bankruptcy, did y | ou lose anyt | hing because of the | ft, fire, other |
| | | No | | | | | |
| | | es. Fill in the details. | | | | | |
| | | ribe the property you lost and | Describ | oe any insurance coverage for the lo | oss | Date of your | Value of property |
| | how | the loss occurred | | the amount that insurance has paid. L ginsurance claims on line 33 of Sched y. | | loss | lost |
| Par | t 7: | List Certain Payments or Transfer | s | | | | |
| 16. | Includ | ulted about seeking bankruptcy or | preparin | d you or anyone else acting on your og a bankruptcy petition? s, or credit counseling agencies for ser | | | rty to anyone you |
| | | es. Fill in the details. | | | | | |
| | Addr Ema | on Who Was Paid ess il or website address on Who Made the Payment, if Not [\] | You | Description and value of any proper transferred | erty | Date payment or transfer was made | Amount of payment |
| | 223 Suit | / OFFICES OF GLENDA J. GRA West Jackson Blvd. e 1116 | Υ | Court Costs \$310.00 Attorney F \$340 | Fees | 2/8/2016 | \$650.00 |
| | | ago, IL 60606 lawgray@gmail.com | | | | | |
| | luuy | iang.uy@gmamoom | | | | | |
| 17. | promi | | ditors o | d you or anyone else acting on your to make payments to your creditored ed on line 16. | | or transfer any prope | rty to anyone who |
| | Pers | on Who Was Paid | | Description and value of any prope | ertv | Date payment | Amount of |
| | Addr | | | transferred | , | or transfer was | payment |
| 18. | Includinclud | ferred in the ordinary course of you le both outright transfers and transfer e gifts and transfers that you have all No | u r busin e s made a | as security (such as the granting of a s | | | |
| | | es. Fill in the details. | | | | | |
| | Pers Addr | on Who Received Transfer ess | | Description and value of property transferred | | any property or received or debts change | Date transfer was made |
| | Pers | on's relationship to you | | | • | • | |
| 19. | benef | n 10 years before you filed for bank iciary? (These are often called asse | | did you transfer any property to a so on devices.) | elf-settled tru | ıst or similar device | of which you are a |
| | | es. Fill in the details. | | | | | |
| | Nam | e of trust | | Description and value of the prope | erty transferr | ed | Date Transfer was made |
| | | | | | | | |

Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Case 16-04025

Document Page 48 of 66

| s lı h | List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | |
|--------------|--|--|--|-------------------------|--|---|--|--|
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of according trument | unt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | |
| ; | TCF Bank 801 Marquette Ave Minneapolis, MN 55402 | XXXX- | ■ Checking □ Savings □ Money Mar □ Brokerage □ Other | ket | 1/2015 | \$0.00 | | |
| | o you now have, or did you have within fash, or other valuables? No Yes. Fill in the details. | l year before you filed t | for bankruptcy, a | ny safe de _l | posit box or other dep | ository for securities, | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had a Address (Number State and ZIP Code) | | Describe | the contents | Do you still have it? | | |
| 22. F | lave you stored property in a storage unit No Yes. Fill in the details. | or place other than yo | our home within 1 | year befor | re you filed for bankru | ptcy | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has o to it? Address (Number State and ZIP Code) | | Describe | the contents | Do you still have it? | | |
| Part 9 | Identify Property You Hold or Control | ol for Someone Else | | | | | | |
| | o you hold or control any property that sor someone. No Yes. Fill in the details. | omeone else owns? In | clude any proper | ty you bori | rowed from, are storin | g for, or hold in trust | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pr (Number, Street, City Code) | | Describe | the property | Value | | |
| | 10: Give Details About Environmental In | formation | | | | | | |
| Part | Give Details About Environmental in | | | | | | | |

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main

Document Page 49 of 66

2/09/16 10:09AM

| Del | otor 1 | Forget N. Johnson | | Cas | e number (if known) | | | | |
|-----|--------|--|---|--------|---|--------------------|--|--|--|
| 24. | Has a | any governmental unit notified you tha | t you may be liable or potentially liable | e und | er or in violation of an environn | nental law? | | | |
| | _ | No Yes. Fill in the details. | | | | | | | |
| | | ne of site ress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | | Environmental law, if you know it | Date of notice | | | |
| 25. | Have | you notified any governmental unit of | any release of hazardous material? | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | ne of site ress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | | Environmental law, if you know it | Date of notice | | | |
| 26. | Have | you been a party in any judicial or adr | ministrative proceeding under any env | /ironn | nental law? Include settlements | and orders. | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | e Title e Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nati | ure of the case | Status of the case | | | |
| Par | t 11: | Give Details About Your Business or | Connections to Any Business | | | | | | |
| 27. | Withi | in 4 years before you filed for bankrup | tcy, did you own a business or have a | ny of | the following connections to an | y business? | | | |
| | I | ☐ A sole proprietor or self-employed i | n a trade, profession, or other activity | , eith | er full-time or part-time | | | | |
| | [| ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | |
| | ı | ☐ A partner in a partnership | | | | | | | |
| | 1 | ☐ An officer, director, or managing executive of a corporation | | | | | | | |
| | 1 | ☐ An owner of at least 5% of the votin | g or equity securities of a corporation | 1 | | | | | |
| | | No. None of the above applies. Go to I | Part 12. | | | | | | |
| | | Yes. Check all that apply above and fill | I in the details below for each busines | ss. | | | | | |
| | Add | iness Name ress her Street City State and ZIP Code) | Describe the nature of the business | | Employer Identification number Do not include Social Security | | | | |

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Dates business existed

No

☐ Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

Name Date Issued Address

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main

Document Page 50 of 66

Debtor 1 Forget N. Johnson Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Forget N. Johnson Signature of Debtor 2 Forget N. Johnson Signature of Debtor 1 Date February 9, 2016 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

2/09/16 10:09AM

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans:

repossess an automobile.

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

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If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

2/09/16 10:09AM

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN **CHAPTER 13 DEBTORS AND THEIR ATTORNEYS**

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

\boldsymbol{A} . BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney

and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: Drafting schedules, plan and anlysis of debt, meeting of creditors
 - The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
 - Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
 - The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$340.00 toward the flat fee, leaving a balance due of \$3,660.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: February 9, 2016 | |
|---------------------------------------|---|
| Signed: | |
| /s/ Forget N. Johnson | /s/ Glenda J. Gray |
| Forget N. Johnson | Glenda J. Gray |
| | Attorney for the Debtor(s) |
| Debtor(s) | |
| Do not sign this agreement if the amo | unts are blank. Local Bankruptcy Form 23 |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 60 of 66

2/09/16 10:09AM

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| т | Farret N. Jahrean | Tot them District of Immois | C. N | | |
|-------|--|---|---|----------------------------|-----------|
| In re | e Forget N. Johnson | Debtor(s) | Case No. Chapter | 13 | |
| | DISCLOSURE OF CO. | MDENICATION OF ATTODA | NEV EOD DE | DTOD(C) | |
| | DISCLOSURE OF CO. | MPENSATION OF ATTORN | NEY FOR DE | BIOK(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. compensation paid to me within one year before be rendered on behalf of the debtor(s) in contemp | the filing of the petition in bankruptcy, or | r agreed to be paid | to me, for services render | ed or to |
| | For legal services, I have agreed to accept | | . \$ | 4,000.00 | |
| | Prior to the filing of this statement I have re | | | 340.00 | |
| | Balance Due | | . \$ | 3,660.00 | |
| 2. | \$ 310.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclose | ed compensation with any other person ur | nless they are meml | pers and associates of my | law firm. |
| | ☐ I have agreed to share the above-disclosed cocopy of the agreement, together with a list of | | | | rm. A |
| 6. | In return for the above-disclosed fee, I have agree | eed to render legal service for all aspects of | of the bankruptcy c | ase, including: | |
| | a. Analysis of the debtor's financial situation, ar b. Preparation and filing of any petition, schedu c. Representation of the debtor at the meeting o d. Representation of the debtor in adversary pro e. [Other provisions as needed] Negotiations with secured creditor reaffirmation agreements and app 522(f)(2)(A) for avoidance of liens | ales, statement of affairs and plan which not of creditors and confirmation hearing, and occeedings and other contested bankruptcy ors to reduce to market value; exemplications as needed; preparation a | nay be required; any adjourned hea matters; nption planning; | rings thereof; | g of |
| 7. | By agreement with the debtor(s), the above-discl | osed fee does not include the following so | ervice: | | |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement bankruptcy proceeding. | nt of any agreement or arrangement for pa | ayment to me for re | presentation of the debtor | (s) in |
| F | February 9, 2016 | /s/ Glenda J. Gray | | | |
| _ | Date | Glenda J. Gray Signature of Attorney | | | |
| | | Law Office of Gleno | da J. Gray | | |
| | | 223 West Jackson, | | | |
| | | Chicago, IL 60606 (312) 386-1010 Fax | x: (312) 386-1020 |) | |
| | | ladylawgray@gmai | l.com | | |
| | | Name of law firm | | | |

Case 16-04025 Doc 1 Filed 02/10/16 Entered 02/10/16 10:11:39 Desc Main Document Page 61 of 66

2/09/16 10:09AM

United States Bankruptcy Court Northern District of Illinois

| | | Northern District of Ininois | | |
|-------|---|---|-----------------|---------------------------|
| In re | Forget N. Johnson | | Case No. | |
| | | Debtor(s) | Chapter | 13 |
| | VI | ERIFICATION OF CREDITOR M | ATRIX | |
| | | Number of | Creditors: | 4 |
| | The above-named Debtor(s (our) knowledge. |) hereby verifies that the list of creditor | ors is true and | correct to the best of my |
| Date: | February 9, 2016 | /s/ Forget N. Johnson Forget N. Johnson Signature of Debtor | | |

1stprogress/1stequity/ Po Box 84010 Columbus, GA 31908

Acceptance Now 5501 Headquarters Dr Plano, TX 75024

Alliance Sol 534 S Pineapple Av Sarasota, FL 34236

Bk Of Amer Po Box 982238 El Paso, TX 79998

Cap One Po Box 19360 Portland, OR 97280

Cap One Po Box 85015 Richmond, VA 23285

Capital One Po Box 30253 Salt Lake City, UT 84130

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Cbna Po Box 6189 Sioux Falls, SD 57117

Chase Po Box 901003 Columbus, OH 43224

Citi Po Box 6241 Sioux Falls, SD 57117 City of Chicago c/o Talan & Ktsanes 300 West Adams Ste #840 Chicago, IL 60606

City of Chicago c/o Roberts & Weddle, LLC 111 N Canal - Suite 885 Chicago, IL 60606-7218

City of Chicago c/o Goldman & Grant 205 West Randoplh St. Ste 1100 Chicago, IL 60606

City of Chicago Dept of Finance Admin Hearings Collections City Hall Rm 107 A - 121 N LaSalle Chicago, IL 60602

City of Chicago Dept of Water 333 South State Chicago, IL 60604

Cook County Clerk 118 North Clark Chicago, IL 60602

Cook County Collector 118 North Clark Chicago, IL 60602

Cook County Treasurer 118 N. Clark, Rm 112 Chicago, IL 60602

Cortrust Bk Po Box 7030 Mitchell, SD 57301

Debt Recovery 900 Merchants Concourse Ste 106 Westbury, NY 11590 Dpt Treasury 3700 East West Hig Hyattsville, MD 20782

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256

First Choice 4422 Route 27 Buil Suite 2 Kingston, NJ 08528

First Choice Bank/Cws 840 Route 33 Mercerville, NJ 08619

First Premier Bank P.O. Box 5147 Sioux Falls, SD 57117-5147

Fst Premier 3820 N Louise Ave Sioux Falls, SD 57107

Fst Premier 3820 N Louise Ave Sioux Falls, SD 57104

Fstprogress P.O. Box 84010 Columbus, GA 31908

Gothic Investments 5225 West Touhy Ste 213 Skokie, IL 60077

Guaranty Savings Bk 7901 W Brown Deer Rd Milwaukee, WI 53223

Imagine/Atlanticus
Po Box 105555
Atlanta, GA 30348

J & Sons Home Repairs 7115 West North Avenue Oak Park, IL 60302

Keisha Parham 1635 N Monitor Chicago, IL 60639

Mage & Price 707 Lake Cook Road Suite 314 Deerfield, IL 60015

Mcsi Inc Po Box 327 Palos Heights, IL 60463

Metabank-Ultravx Visa 2500 S Minnesota Ave Sioux Falls, SD 57105

Ncc Business Svcs Inc 9428 Baymeadows Rd Ste 2 Jacksonville, FL 32256

Peoples Engy 200 East Randolph Chicago, IL 60601

Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Purpadv/Fbd P O Box 105591 Atlanta, GA 30348

Santander Consumer Usa Po Box 961245 Ft Worth, TX 76161

State Collection Servi 2509 S Stoughton Rd Madison, WI 53716 Talan & Ktsanes 223 West Jackson Chicago, IL 60606

Unique National Collec 119 E Maple St Jeffersonville, IN 47130

Wexler & Wexler 500 West Madison Suite 2910 Chicago, IL 60661